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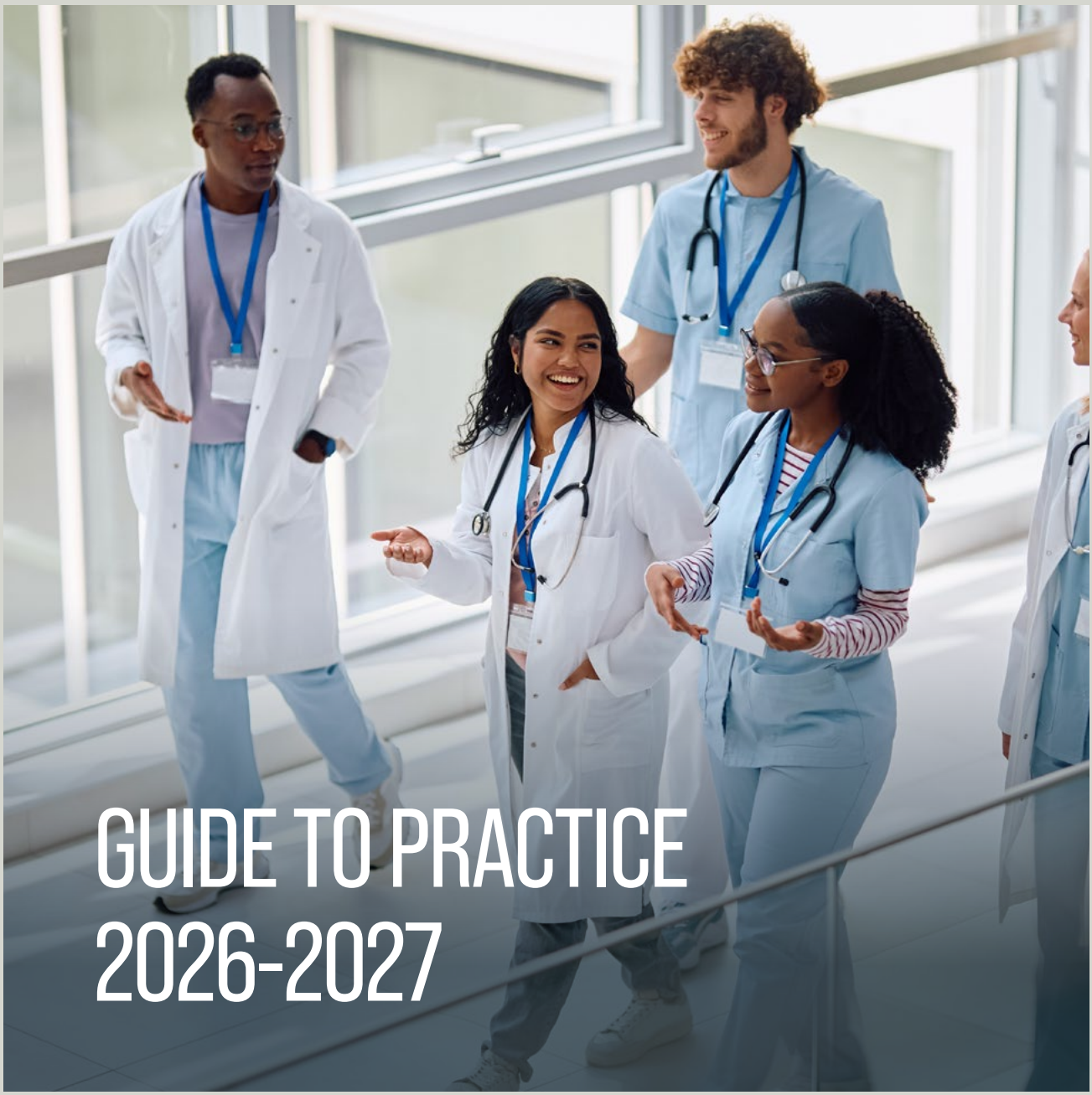

GUIDE TO PRACTICE 2026-2027

FÉDÉRATION DES MÉDECINS RÉSIDENT·E·S DU QUÉBEC

AVAILABLE POSITIONS

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PRACTISING MEDICINE IN QUEBEC:

A GUIDE TO HELP YOU PREPARE FOR PRACTICE

Dear Colleagues,

The election of a new government on October 5, 2026 marks the beginning of a period of change in the healthcare system. With the new government's avowed intention of addressing several important issues, including the possible reorganization of *Santé Québec*, it is clear that healthcare will be a core concern of the newly elected MNAs, and that new legislative measures could be put forward in short order. Rest assured that we will be monitoring these issues very closely, to ensure that we continue to defend your interests and safeguard your rights.

In the meantime, we want to tell you about all the steps leading to the autonomous practice of medicine, under the rules currently in effect. As happens every year, 1,000 or so final-year residents will enter practice or are preparing to undertake additional training or fellowships outside Quebec in July. They share the goal of finding an ideal position that most closely meets their expectations and allows them to harness knowledge acquired through great personal effort since they started their medical studies.

Several tools are at your disposal to help you find your way through the process. The plethora of tools to guide you in this process include the physician resource plans posted on the *Santé Québec* site, in both family medicine (PTEMs/PEMs) and other specialties (PEMs), our website, the FMRQ's new mobile app, or our presentations in specialty programs given throughout the year. In family medicine, the FMRQ presents the PTEM application process to you each year at Career Day and the Symposium on Family Medicine, as well as publishing a *Personalization and Voluntary* Poursuite de formation *in Family Medicine Guide*, which covers voluntary extension of residency and may be found on our website. We invite you to take a look at the Guide, and to be sure to consult us should you need to.

Whether you are actively seeking a position as the end of your postgraduate education approaches, or want to upgrade your knowledge before starting your practice, or to moonlight during your residency, the FMRQ can accompany you, to clarify different, sometimes nebulous aspects of looking for a position. These can prove complex, depending on the specialty or your interests. You also have access to resource persons within the FMRQ who are fully up to date on how things are in the field and can help you figure things out, and to your colleagues on the Physician resource planning committee in specialties (CPEM) and the Academic Affairs Committee – Family Medicine (CAP-MF).

Close to 1,000 of you took advantage of Career Day, held last October 2 at Montreal's *Palais des congrès* convention centre, attending our lunch-hour conferences and meeting with representatives from the different regions of Quebec. The FMOQ and FMSQ, along with *Santé Québec* and the Ministry, were also on site, as were more than 100 healthcare establishments, to answer participants' questions and sometimes confirm positions.

If you have any questions, feel free to consult FMRQ staff. You may do so in complete confidentiality, by emailing ptem-mf@fmrq.qc.ca for positions in family medicine, and pem-sp@fmrq.qc.ca for positions in one of the 59 other specialties recognized in Quebec.

In closing, I remind you that under the legislation adopted last year by the Legault-Dubé government, newly terminated residents are required to work solely in the public sector for the first five years of practice if they stay in Quebec. The FMRQ is continually working to enhance your work and practice conditions during residency, but we also devote a great deal of resources to ensure that your transition to practice is as smooth as possible. In all cases, we are there for you!



Louis-Charles Desbiens, M.D.
President

1.

FAMILY MEDICINE



This section contains information on the process for granting PTEMs in family medicine. It begins with a glossary, to make the rules easier to understand, and includes full details on the procedure for obtaining a PTEM, a PTEM in a University Family Medicine Group (UFMG) or a PEM in an establishment, the 55%-45% rule, specific medical activities (AMPs), and locums.

GLOSSARY 101

Special medical activity (*Activité médicale particulière*, or AMP)
Medical activities listed in the Act respecting health services and social services as having a priority dimension. Conditions for physicians' participation in AMPs have been determined through a special agreement between the Minister and the FMOQ.

Upon obtaining a notice of compliance with the territorial physician resource plan (PTEM), a physician with 15 years of practice or less must choose an AMP offered by the region to meet local needs. This AMP will be performed in one of the services named, for the equivalent of 12 hours per week.

Compliance notice (*Avis de conformité*)
Family physicians practising under the Quebec health insurance plan are subject to the Special agreement on compliance with territorial physician resource plans (PTEMs). Under that agreement, the physician has to obtain a notice of compliance with the PTEM from the Territorial department of family medicine (DTMF) of the practice region in question. Obtaining this compliance notice implies the physician's commitment to maintaining the majority of his practice, i.e., 55% or more of his billing days, in a sub-area (local services network, or RLS) of that region. The frequently used expression "to have a PTEM" is shorthand for holding a notice of compliance with a given region's PTEM.

University needs (*Besoins universitaires*) (UFMG PTEM) (*PTEM GMF-U*)
Compliance notice reserved for doctors wishing to teach. This involves teaching positions set aside to meet priority academic needs.

WARNING

For this type of PTEM, it is the director of the family medicine program of the faculty concerned who selects the candidate and confirms his choice with his region's DTMF and *Santé Québec* by December 15.

Selection criteria (*Critères de sélection*)
When the number of candidates exceeds the number of positions available in the PTEM, a selection is made via interview. This selection is made primarily on the basis of the physician's interest in practising in the priority needs identified by the DTMF.

Locum (*dépannage*)
Part-time locum (Dépannage à temps partiel)
A physician who holds a compliance notice but wants to perform locums part-time. Note that this practice is included in the 55%-45% ratio.

PREM exclusively for locums (PREM dépannage exclusif)
A doctor wishing to practise exclusively under the locum mechanism can obtain a waiver in lieu of a compliance notice. This has to be applied for on registering for locums with the provincial *Centre national médecins-Québec*. To register for locums, the physician has to hold a permit to practise from the *Collège des médecins du Québec* (CMQ) and malpractice insurance corresponding to the areas of activity covered by his locum practice. A practice is considered exclusive when it includes 95% or more of the physician's total billing days.

Opting out of a PTEM (*Désistement à un PTEM*)
You may opt out of a PTEM at any time if you have not started your practice.

Territorial department of family medicine (DTMF, for *Département territorial de médecine familiale*)
Each region has a Territorial department of family medicine (DTMF) consisting of all the general practitioners in the region who receive compensation from the Quebec Health Insurance Board (RAMQ). The DTMF's responsibilities are carried out by a Steering Committee consisting of physicians who belong to the department. In particular, the DTMF's mandate is to make recommendations concerning PTEMs, general medical services, and AMPs. It defines and proposes a regional organization plan for general medical services and a network of access to general medical care.

DTMF director (Directeur·rice du DTMF)
Territorial department of family medicine director
The Director of the Territorial department of family medicine is in charge of authorizing and signing compliance notices.

Healthcare establishment (*Établissement de santé*)
A healthcare establishment is a group of healthcare facilities (hospital, local community services centre [CLSC], long-term care facility [CHSLD], etc.) which covers services for a given region. Following the adoption of Bill 10 in 2015, the Minister grouped the 182 existing healthcare establishments into 34 establishments. Rounding out the network are the university health centres, and institutes.

Facility (*Installation*)
A facility is a physical site where healthcare is delivered. Facilities are hospitals, local community service centres (CLSCs), residential and long-term care facilities (CHSLDs), rehabilitation centres, etc., which are grouped together under a healthcare establishment within the meaning of the law.

Billing day (*Journée de facturation*)
A billing day is counted only if the compensation (pay) associated with that day is equal to or greater than $523. A half day can be counted if the compensation associated with that half day is equal to or more than $261.50 and less than $523.

Inter-regional mobility (*Mobilité interrégionale*, or MIR)
Status of a physician who has worked a minimum of 200 days (synonymous with "doctor already practising").

Non-compliance with compliance notice conditions (*Non-respect des conditions de l'avis de conformité*)
A physician who does not meet his commitment to perform 55% or more of his billing days in the geographical area covered by his PTEM compliance notice is subject to a 30% cutback of his total compensation for the year in question, i.e., from March 1 to February 28-29. The physician is notified by the Quebec Health Insurance Board (RAMQ) around September 1 of the following year. He may, however, request an exemption; his file will then be reviewed by the MSSS-FMOQ Parity Committee responsible for the Special Agreement concerning PTEM compliance.

New biller (*Nouveau facturant*)
New billers are physicians who have not yet completed at least 200 days of practice under Quebec's public health insurance plan. During those 200 days of practice, the physician must have held a valid notice of compliance with the region's PTEM or obtained a waiver in lieu of a notice of compliance with the PTEM.

Physician resource plan (PEM, for *Plan d'effectifs médicaux*)
Physician resource plan of a facility, healthcare establishment
"PEM" is used to designate positions in hospitals. You need a PEM to be able to work in a hospital setting.

Initial application period (*Période initiale de dépôt des candidatures*)
The initial application period runs from December 1 to 15 each year.

Practice without a compliance notice (*Pratique sans avis de conformité*)
Physicians practising under the Quebec Health Insurance Plan (RAMQ) without having obtained a notice of compliance with the PTEM from the Director of the Territorial department of family medicine (DTMF) of a region will have their total compensation cut back by 30%. A five-year waiting period will also be imposed on them before they can apply for a compliance notice in that subterritory.

Territorial physician resource plan (PTEM, for *Plan territorial d'effectifs médicaux*)
Territorial physician resource plans (PTEMs) in family medicine authorize, for each of Quebec's administrative regions, a quantitative target for recruitment of family physicians designed to distribute additional physician resources equitably. These plans are updated yearly on the basis of the differences observed between the resources in place and the needs to be met in each region. They take into account the mobility of physicians already practising and the expected number of new doctors. Since Quebec's regions do not all enjoy the same level of access to healthcare services, PTEMs aim to provide Quebecers with more equitable access to medical services.

In family medicine, the term "PTEM" is used to designate positions allocated in one of the 18 administrative regions, with priority hiring in a local services network (RLS). Obtaining a compliance notice implies that the doctor undertakes to maintain the majority of his practice, i.e., 55% or more of his billing days, in a sub-area (RLS) of the region where he holds a PTEM.

PTEMs are associated not with a type of practice but with a practice location.

Region (*Région*)
Quebec is divided into 18 administrative regions. When you apply for a compliance notice, you do so to one of these regions:
Region 1 – Bas-Saint-Laurent
Region 2 – Saguenay–Lac-St-Jean
Region 3 – Quebec City (Capitale-Nationale)
Region 4 – Mauricie–Centre-du-Québec
Region 5 – Estrie
Region 6 – Montreal
Region 7 – Outaouais
Region 8 – Abitibi-Témiscamingue
Region 9 – Côte-Nord
Region 10 – Nord du Québec
Region 11 – Gaspésie–Iles-de-la-Madeleine
Region 12 – Chaudière-Appalaches
Region 13 – Laval
Region 14 – Lanaudière
Region 15 – Laurentides
Region 16 – Montérégie
Region 17 – Nunavik
Region 18 – James Bay Cree Territory

Local services network (*Réseau local de service*, or RLS)
Each region is divided into sub-areas. So you have a notice of compliance with a region's PTEM, with priority hiring in a sub-area (RLS).

SCOPE OF A PTEM COMPLIANCE NOTICE

Positions in a PTEM have a geographical scope and are not in any way associated with a facility, doctor's office, or specific activity. None the less, the DTMF must, within the framework of its mandate, identify its region's priority needs, both primary and secondary. Identification of needs should guide the DTMF in the selection of candidates when there are more applications than positions in the PTEM. Also, the needs identified in a sub-area will guide candidates in their choice of location and activities.

EFFECTIVE DATE OF PTEMS

The PTEM for a year comes into effect on December 1 of the previous year and ends on November 30. So, for instance, the 2027 PTEM will take effect on December 1, 2026 and terminate on November 30, 2027.

OBTAINING A PTEM IN FAMILY MEDICINE

Candidates may not submit their compliance notice applications for the following year's PTEM before December 15 of the current year. Applications submitted after December 15 are dealt with at the end of the process, starting February 27, 2027.

Submitting a compliance notice application
The initial period for submission of applications runs from December 1 to 15 of the current year, inclusive. All applications received during that period are deemed to be received on December 15.

N.B.

Candidates applying after December 15 will be assigned a position on the basis of the date and time their compliance notice application was received, from February 27, 2027 onward.

All compliance notice applications are forwarded by the candidate to *Santé Québec* on the electronic form for 2027 PTEM compliance notices (available on the MSSS website). This form is the sole document to be sent in.

Santé Québec sends each applicant an acknowledgment of receipt.

Any response from a DTMF following the submission of a compliance notice application has to be made by email.

Processing of a compliance notice application by the DTMF
The initial period for processing compliance notice applications runs from December 16, 2026 to February 26, 2027.

Starting December 16, 2026, *Santé Québec* forwards the applications received to the DTMFs in the regions selected by the candidates.

When the number of positions available in the PTEM of a sub-area which candidates have marked as their first choice is lower than or equal to the number of applications received for that sub-area, no selection is carried out, and the DTMF has to issue the compliance notice.

When the number of applications received for a sub-area exceeds the number of positions available in that sub-area's PTEM, all applications are evaluated by the DTMF via interview. This evaluation must comply with the following selection process.

EXAMPLES

1. There are fewer applicants than positions – automatic selection – all these individuals receive their PTEM:
   - 10 candidates apply with RLS de Verdun as their first choice
   - RLS de Verdun has 12 PTEMs available
   - All 10 candidates receive their PTEM automatically
2. There are more applicants than positions – selection by interview:
   - 15 candidates apply with RLS de Verdun as their first choice
   - RLS de Verdun has 12 PTEMs available
   - ALL these individuals are interviewed

Selection process

If the number of applications received exceeds the number of positions available in the PTEM, the DTMF has to conduct candidate selection, in line with the following principles:

- A selection committee is formed;
- The DTMF establishes candidate selection criteria. The selection criteria have to be limited to matters within the DTMF's jurisdiction;
- All candidates are interviewed individually.

Interview and selection criteria

The objectives of the interview are the following:

- **Find out intentions in terms of professional interests and activities envisaged;**
- Evaluate the candidate's level of knowledge of special regional features, approach carried out, reason for this choice;
- Evaluate experience acquired, career path, achievements, challenges, and goals;
- Evaluate level of knowledge of the healthcare system;
- Evaluate personality, capabilities, and behaviour through scenarios whereby candidates can show their qualities;
- Provide relevant information on the region;
- Answer the candidate's questions.

WARNING

With respect to patient management, it is your interest in that type of practice that questions should be asked about, and not your interest in a specific clinic.

The choice of clinic where you will perform your patient management is up to you.

Interviews must be conducted in line with the hiring conditions established by the provincial human rights and youth rights commission.

Acceptance and withdrawal

On January 29, 2027, all DTMFs respond in writing to candidates, confirming the geographical area corresponding to their 1st or 2nd choice, offering another sub-area that has remained vacant, or informing them that their application has been denied.

Candidates have a maximum of five days to respond to the DTMF in writing. Candidates' failure to respond within five days is considered a refusal.

Candidates who accept the compliance notice offered by the DTMF are removed from the process for that region alone.

Candidates who refuse the compliance notice offered by the DTMF continue the process.

Candidates who do not respond within the prescribed timeframe are deemed to have withdrawn.

Candidates who first accepted and then withdrew from their compliance notice will have to submit a new PTEM compliance notice application. These new applications will be processed in the order in which they are received at *Santé Québec*.

Effective February 27, 2027

When positions are available in the PTEM, the first come, first served principle is applied.

OBTAINING A PTEM IN A UNIVERSITY FAMILY MEDICINE GROUP (UFMG) THESE ARE POSITIONS SET ASIDE FOR UNIVERSITY NEEDS

For this type of PTEM, it is the director of the family medicine program of the faculty concerned who selects the candidate.

As soon as a candidate is identified to fill one of these positions, but no later than December 15, the director of the family medicine department of the medical faculty concerned must confirm his choice to Santé Québec and the DTMF responsible for issuing the selected candidate's compliance notice.

When an academic applicant comes forward during the year to meet a UFMG priority recruitment, hiring will be possible provided the candidate is selected by the director of the family medicine department of the medical faculty concerned and a position is available in the sub-area's PTEM.

When a recruitment is used to meet priority academic needs, the DTMF may, on certain conditions and subject to approval from the Physician Resource Management Committee – Family Medicine (COGEM), grant a compliance notice over and above its regional target for authorized recruitment. The physician contemplated by the recruitment must:

- Qualify with respect to inter-regional mobility and have accumulated at least three years' active practice within the meaning of Appendix II of the Special agreement concerning PTEMs (EP-PREM);
- Have obtained the recommendation of the director of the university family medicine department of the medical faculty concerned;
- Have the expected practice profile in line with the guidelines recognized by COGEM;
- Carry out all his patient registrations within the UFMG concerned.

EARLY-CAREER FAMILY PHYSICIAN RESEARCHER

A family physician researcher may, upon the recommendation of the Joint Evaluation Committee, be considered, over and above the positions authorized in the PTEM, as an early-career clinical investigator, provided the following conditions are met:

- The number of these positions will be four per year, i.e., one per medical faculty;
- Positions unfilled in the PTEM of one year cannot be carried forward to a subsequent year;
- The subarea covered by the compliance notice must be the one where the physician will have his main clinical practice.

To make an application, the DTMF must submit to COGEM an application for authorization to hire over and above the target authorized by the Minister. The following documents must be attached to the application:

- Letter of support confirming the doctor's commitment to performing his percentage of activity devoted to research;
- Hiring letter from the university;
- Favourable recommendation from the Joint Evaluation Committee.

When he obtains his compliance notice, the clinician-scientist will be able to take advantage of specific recognition of his clinician-scientist practice for his specific medical activities (AMPs), if he wishes. He will then have to apply for it to his territorial department of family medicine (DTMF), which will submit his application to the Parity Committee.

OBTAINING A PEM IN AN ESTABLISHMENT (for family physicians)

Identification of sectors of activity authorized to recruit, and priority needs

The DTMF, in conjunction with the medical and professional services directors (DMSPs) of its region and its area partners, draws up a list, by sub-area, of the sectors of activity with recruitment needs in its region.

The DTMF posts on its website a list of recruitment needs in establishments, and a list of priority needs for delivering primary care to patients in doctors' offices.

To apply for a PEM in an establishment:

- You must send your appointment application form to the executive director of the establishment;
- Your application will be reviewed by the Executive Committee of the Council of Physicians, Dentists, Pharmacists and Midwives (CMDPSF);
- The head of department or service or the Medical and Professional Services Director where you wish to practise will be able to assist your in the procedure.

YOUR OBLIGATIONS WITH RESPECT TO YOUR PTEM COMPLIANCE NOTICE

Deadline for setting up in practice

To be eligible for obtaining a notice of compliance with a region's PTEM, a candidate has to undertake to start his practice in that region **within 12 months following the receipt of his compliance notice application by *Santé Québec***.

The physician may, however, ask for his start of practice to be deferred for a maximum of six months. It is up to the DTMF to agree to or deny the deferral request on grounds it deems fair and equitable.

55% - 45% rule

Doctors must devote at least 55% of their annual work days to the sub-area where they hold their PTEM compliance notice.

A day is considered as soon as the physician has billed at least $523 in the geographical area, and a half day with billing between $261.50 and $523.

The distribution of the doctor's practice is evaluated on an annual basis with regard to days worked, from March 1 to February 28-29 of the following year, from the date of issue of the PTEM compliance notice.

If the physician begins after the year has begun, the calculation is prorated, from the date of issue of the compliance notice.

A doctor may therefore devote up to 45% of his billing days to practising outside the area where he holds his compliance notice, either in another RLS in the same region, in one of Quebec's 17 other regions, or on part-time locums.

* WARNING: Currently, only the Quebec City (*Capitale-Nationale*) region (except for the Portneuf and Charlevoix sub-areas) is subject to the following rule: a doctor who has no compliance notice from that region may not perform more than 5% of his billing days there.

SPECIFIC MEDICAL ACTIVITIES (AMPS)

Specific medical activities (AMPs) stem from the *Act respecting health services and social services*, and physicians with 15 years' service or less are required to sign on to them. Non-compliance with the AMP Special Agreement can lead to a 30% cutback in compensation.

It is the DTMF that manages the AMPs of doctors in its region. *Santé Québec* assigns them according to an established order and in line with the region's priority needs. If several AMPs are available, an agreement may be reached with the DTMF. Such an agreement must be signed no later than the end of the first complete quarter following the start of your practice in the region, and at the earliest when they sign their PTEM compliance notices.

For the 2025 PREMs, physicians may now choose their AMPs when they sign their PREM compliance notices.

AMPs are grouped together in three priority blocks:

1st BLOCK: I – Emergency/Super-clinic (GMF-R)

2nd BLOCK: II – Primary-care delivery of medical services, including registration and patient management
III – Short-term hospitalization with on-call duty
IV – Obstetrics
V – Long-term care facility (CHSLD), rehabilitation centre, or home support, all with on-call duty

3rd BLOCK: VI – Any other activity established by the CEO of Santé Québec (a list of these activities is available in Appendix 1 of the Agreement). Each such activity must, however, be approved as an AMP by the Parity Committee before being authorized by the DTMF.

You must undertake to perform one of these activities for the equivalent of 12 hours per week, 44 weeks per year. Below is a list of recognized equivalences for each of the areas of activity identified:

- **Emergency:** 16 call shifts of 8 hours per quarter.
- **Patient management:** 500 registered patients (vulnerable and non-vulnerable).
- **Hospitalization:** 18 active beds per day, one week in five, including on-call duty.
- **CHLSD:** 50 beds on a weekly basis, including on-call duty.
- **Home support:** 10 home visits per week to patients enrolled in the CLSC's home support program.
- **Obstetrics:** 15 deliveries per quarter, including on-call duty.
- **Palliative care:** 10 beds on a weekly basis, including on-call duty.
- **Intensive functional rehabilitation unit (URFI):** 20 beds on a weekly basis, including on-call duty.

* Note that the DTMF may choose exclusive AMPs, i.e., the equivalent of 12 hours per week in a single area of activity, or mixed AMPs, i.e., two types of activities, the equivalent of six hours a week for each type of activity.

IF YOU PRACTISE WITHOUT A PTEM (in the public system, not private practice)

- Your compensation will be cut back by 30%;
- You will have to wait five years before applying for a compliance notice in that region;
- You will retain new biller status;
- But, if you obtain a compliance notice in another region and work there for three years, you will subsequently be able to apply for a position in the subterritory where you practised without a PTEM.

PHYSICIANS RETURNING FROM REMOTE REGIONS AFTER THREE YEARS' CONTINUOUS PRACTICE

A PTEM compliance notice cannot be denied to a doctor who has practised continuously for at least three years in one of the areas listed in Appendix XII of the FMOQ-MSSS Agreement, even if the PTEM is full:

- The doctor must undertake to practise principally in a sub-area;
- Practice carried out under the locum mechanism is not considered in the calculation of principal practice in a remote region;
- Principal practice is deemed to be continuous if it is carried out without interruption of more than 24 months in one or more regions contemplated in Appendix XII of the Agreement.

OPTING FOR LOCUMS

The locum mechanism enables a doctor to come to the assistance of sites designated by the MSSS-FMOQ Parity Committee in three sectors of activity: Emergency, Short-term, and Obstetrics.

There are two situations where a doctor may practise under the locum mechanism:

I. PTEM EXCLUSIVELY FOR LOCUMS

He holds a waiver in lieu of a compliance notice for practising exclusively on locums with a commitment to practising on locums for at least 95% of his annual billing days.

II. PART-TIME LOCUM

He holds a compliance notice from a region and registers as a locum (*médecin dépanneur*). In this scenario, the doctor has to maintain his commitment for the majority of his practice (55% of his billing days) to be carried out in the area where the PTEM compliance notice is signed. For further information, consult the *Information handbook for general practitioners performing locums* and the *Locum mechanism registration form*.

Information handbook for general practitioners performing locums:
https://h38.pub.msss.rtss.qc.ca/Fichiers/Formulaire%20d'inscription%20m%C3%A9decin%20omnipraticien.pdf

Locum mechanism registration form:
https://h38.pub.msss.rtss.qc.ca/Fichiers/Guide%20%C3%A0%20l'intention%20des%20omnipraticiens_2026-08.pdf

2.



OTHER SPECIALTIES

Holding a position in an establishment's physician resource plan (PEM) is a prerequisite for delivering care there, in all medical, surgical, and laboratory specialties. Doctors may obtain privileges in more than one establishment, but will be counted only in the PEM of the establishment where they perform most of their practice. Also, it is possible to obtain associate member privileges in another establishment's PEM, with the agreement of the medical and professional services directors of both the establishments concerned. The purpose of this measure is to ensure compliance with physicians' obligations in the establishment where they hold their PEM, while enabling them to help offset a physician resource shortage or offer specific expertise to this other establishment.

In December 2025, *Santé Québec* released its three-year plan for positions in specialties other than family medicine, for 2026 to 2028. This plan enables terminating residents to check where there are vacant positions. PEMs are posted according to the year in which they come into effect, by specialty, and by establishment and facility (hospital), on the Ministry website, which is updated monthly. You may consult the table at: www.msss.gouv.qc.ca/professionnels/medecine-au-quebec/plans-d-effectifs-medicaux-pem-en-specialite/#postes-disponibles-medecine-specialisee.

The Ministry's physician resource plan will now be renewed every three years.

Also, it is important to know that it is possible for the establishment granting you a position to require you to practise in two of its facilities in the same PEM, on the basis of needs identified in the different geographical areas covered by the establishment.

Finally, if an establishment considers that it has needs exceeding the number of positions allocated to it in the plan, it will be able to apply for a waiver to add a position to its physician resource plan (PEM). The rules concerning waiver applications are available for free download on the MSSS website under *Règles de gestion – Plan d'effectifs médicaux en spécialité* publications.msss.gouv.qc.ca/msss/document-002982/.

RULES CONCERNING RETIREMENT

Beneficial for terminating residents

Since January 1, 2021, end-of-career conditions for specialist physicians belonging to the FMSQ, have the effect, at the same time, of freeing up full-time PEMs, notably for recently terminated residents as soon as the specialist physician in place starts a reduced practice. Here are a few advantages linked yo these measures.

End-of-career management

- Specialist physicians **aged 63** may reduce their practice to 50% in an establishment for two years.
- Specialist physicians **aged 65 and over** may reduce their practice in an establishment for three years by contributing 20% of their usual practice in an establishment (equivalent to 1 day per week).
- Signing on to these terms and conditions is voluntary, and requires the agreement of the head of service/department.
- This measure has the effect of freeing up 1 full-time PEM for a terminating resident or any other physician already in practice.
- Note that physicians taking advantage of the 63-year-old rule (50% of their practice for two years) will subsequently be able to apply for the program offered to those 65 and over (20% of their practice for three years).

RULES CONCERNING RETIREMENT

Retirement

- Practising physicians may confirm their retirement to their establishment three years before the date on which their association with the establishment ends. **The overlap with a successor is still only six months, though**.

Early-career practice without PEM

- Newly certified doctors may practise in hospitals with major succession needs without a PEM for up to two years.
- These positions are often in remote or isolated regions.
- After these two years, it is still possible to continue one's career without a PEM, but for this there is a requirement of 32 weeks (160 days) of practice in a single establishment with major needs.

Moonlighting

- It is still possible for resident doctors with a regular permit in a first specialty to perform moonlighting, but this rule normally holds for regions with major needs (usually where the PEMs are not full).

PROCESS FOR OBTAINING A PEM IN A NON-FM SPECIALTY

- First, make yourself known in the establishment where you are seeking a position. If you have the opportunity ahead of time, include a rotation in the facility;
- Get in touch with the head of department and the Medical and Professional Services Director (DMSP) or Deputy Director;
- When you have made your choice, send the appointment notice application form to the medical and professional services director of the establishment concerned (this form is available from the DMSP's office);
- The application will then be evaluated by the Credentials Review Committee, which makes a positive or negative recommendation concerning your application to the Council of Physicians, Dentists, Pharmacists and Midwives (CMDPSF), which follows the same procedure with respect to the establishment's Board of Directors;
- If your application is accepted, the establishment's Board of Directors submits an application to fill this position to *Santé Québec* to obtain confirmation that this appointment is in compliance with the establishment's PEM;
- If *Santé Québec* agrees, it issues a notice of compliance with the establishment's physician resource plan (PEM) and forwards it to the establishment;
- The establishment (CISSS, CIUSSS, Institute, etc.) must, as early as possible or within no more than 90 days following receipt of an appointment notice application, send the applicant a written decision setting out his privileges;
- The grounds for any refusal must also be given in writing;
- The physician must confirm his decision and acceptance of his conditions of appointment in writing within 60 days following the notification date in order for his privileges to be validated.

For positions in university settings, candidates must perform a fellowship of 3-12 months' duration. Training in Quebec is paid by RAMQ. A second year is possible, but requires justification from the establishment to the Ministry. Note that the medical faculties with which the establishments are linked often require at least a 1-year fellowship to award those positions, owing to the teaching responsibility associated with them. **Some non-university establishments** may also require a fellowship in order to cater to a specific need that will meet the requirements of the population in their territory. Furthermore, **training of 6 months or less** does not require MSSS approval, and is negotiated with the department concerned and the Office of the faculty Associate Dean. For further information on fellowships, consult the section on that topic on page 14.

TO START YOUR PRACTICE, YOU MUST HAVE AT LEAST:

- your specialist certification (have passed the Royal College exam);
- confirmation of your participation in an ALDO-Quebec information session from the Collège des médecins du Québec (CMQ);
- your permit to practise;
- your proof of malpractice insurance coverage;
- paid your annual membership fee (be registered on the CMQ membership roll);
- finalized your registration with the Quebec Health Insurance Board (RAMQ) for billing purposes (this may be done subsequently, online).

RECRUITMENT IN ANTICIPATION OF A DEPARTURE DURING THE YEAR (retirement or other)

Even when an establishment's PEM is full, a compliance notice may be issued for a recruitment in anticipation of the departure of a physician who has provided written notice of his intention to cease practising in the establishment and whose resignation will take effect within three years. The recruited physician may not, however, take up his duties until six months prior to the departure date of the incumbent doctor.

LOCUMS

The purpose of a locum (temporary replacement) is to enable a doctor to take on the clinical and administrative duties of another physician who holds a PEM, who has to take time away from his or her position (illness, sabbatical leave, maternity, etc.). **This does not constitute a permanent position** for the replacing doctor, who loses his privileges once the locum is over, and has to find another position. It is also possible in an emergency to obtain authorization to practise in an establishment without a position in the PEM. But this measure is valid for no more than three months, and cannot be renewed, barring exceptional circumstances determined by the establishment and accepted by the MSSS.

NETWORK POSITIONS (PROs/PRFs)

Some agreements allowing for positions to be added are associated with a network position. These positions may be used to recruit a specialist physician in the establishment holding a position, or to recruit a specialist physician in another establishment, i.e., an optional network position (known by its French acronym, PRF, for *poste en réseau facultatif*), provided a service agreement has been reached between two establishments. Some establishments have a mandatory network position (PRO, for *poste en réseau obligatoire*). These positions are generated when a service corridor is created permanently between two establishments (e.g., MUHC and Nunavik).

IMPORTANT

These positions cannot be based on a single individual, and have to demonstrate a commitment from the establishments' entire medical team and their administrations to meet the associated obligations (service corridors).

RESEARCH SCIENTIST POSITIONS

There are certain situations where a doctor can be hired outside the PEM. Research scientists are a case in point. It is, however, necessary in such cases for the candidate to obtain a PEM ahead of time from the establishment where he wishes to practise. When the person concerned has obtained research grants, his position can be recognized by the Ministry as being outside the PEM, for the purpose of hiring other candidates in the department. Research scientists must then sign on to the Memorandum of understanding concerning the establishment of special pay terms and conditions for research scientists (*Protocole d'accord concernant la mise en place de modalités de rémunération particulière pour les chercheurs-boursiers*).

In the event of a change in a research scientist's career, he will be able to remain in his facility to practise there even if he withdraws from the Memorandum of understanding. He will then be deemed to be surplus to the PEM, the status of which will be corrected upon the departure of a colleague in that specialty. The same rule applies to those with an exclusive practice in palliative care and intra-operative assistance. For further details, please consult the management rules for physician resource plans in specialties (*Règles de gestion des plans d'effectifs médicaux en spécialité*) on the MSSS website publications.msss.gouv.qc.ca/msss/document-002982/.

RETURNING FROM THE REGIONS (three-year rule)

After three years' continuous practice in a remote or isolated region, a physician cannot be refused entry to another region on the grounds that the region's physician resource plan or establishments' PEMs are full. Nevertheless, to obtain a position in a university hospital, he will have to meet the fellowship requirements and receive the agreement of the region's medical faculty. A physician taking advantage of this rule will be able to do so once only, within no more than 12 months from the date on which he left the establishment in the regions. To obtain a position in a new region, he will first have to fill the positions available in the PEMs of the new region where he will be setting up in practice. If all the PEMs in his discipline are full, he will be sent a list of five establishments determined according to Ministry priorities, from among which he may choose. In such cases, the MSSS may authorize the PEM of the establishment concerned to be temporarily exceeded. To obtain the list of remote or designated regions, please email the FMRQ at pem-sp@fmrq.qc.ca.

RECRUITMENT VIA WAIVER

When an establishment's needs warrant, the Medical and Professional Services Director (DMSP) may apply for its physician resource plan (PEM) to be exceeded temporarily via waiver. A PEM waiver is an exceptional measure, and requests to that effect have to meet strict criteria: candidate's specific expertise; volume of establishment's activity; waiting lists; development (addition of equipment); stabilization of teams (age of practising physicians); establishment of a service agreement; and, in very rare cases, humanitarian grounds. **The waiver confers a permanent position on the candidate**. The establishment's PEM will then have been temporarily exceeded, and the next departure in the specialty concerned will not be replaced. Waiver applications are reviewed by the members of the Physician resource management committee for specialties (COGEMS), which includes the *Fédération des médecins spécialistes du Québec* (FMSQ), Ministry of Health and Social Services (MSSS), and *Fédération des médecins résident·e·s du Québec* (FMRQ).

WATCH OUT FOR VIRTUAL PEMs

If you come across virtual positions, i.e., positions available in the physician resource plan on the Ministry site but that the establishment tells you have already been filled or it has no intention of filling, we advise you to take the following steps:

1) Send in a formal appointment notice application anyway;
2) Wait for the establishment's response;
3) **If the response to your application is negative and the letter specifies that the establishment does not intend to recruit for the position allocated by the MSSS, get in touch with the FMRQ so we can investigate the situation and lobby the Ministry to have the position moved elsewhere, as applicable.**

WATCH OUT FOR PROFESSIONAL SUICIDE PEMs

Some positions are located in regions where practice in a given specialty is limited, owing to the excessively low quantity and limited diversity of cases, or because the doctor will be practising on his own. These positions are seen as professional suicide, because they could mean the physician is unable to return to practise in another setting owing to loss of expertise, which is known to occur rather quickly in medicine, depending on the conditions. In such cases, the FMRQ recommends that service corridors (network positions) be established instead, to enable candidates for these positions to maintain their knowledge and technical skills, by sharing responsibility for delivering care with the other doctors in the partner hospital department.

PRACTISING EXCLUSIVELY IN AN OFFICE/NO PEM REQUIRED

Practice in an office in specialties other than family medicine is not governed by establishments' physician resource plans (PEMs). Doctors wishing to practise exclusively in an office in the public healthcare system have no steps to take to obtain a PEM. We are referring here to working in a private office, not to withdrawing from RAMQ, but in such cases they will be unable to obtain hospital privileges, however, limited, because new doctors have to practise in the public system for five years, since the adoption of Bill 83, before being allowed to work in the private sector. But this option applies to a limited number of specialties, such as dermatology, psychiatry, and rheumatology, for instance.

Note that the government wishes to impose specific medical activities (AMPs) on specialist physicians who do not have a PEM and thus work only in an office. These AMPs are under discussion, and will be established for each of the specialist physician associations concerned, to help meet needs in hospitals. We will send you details of these AMPs once they have been agreed on.

Obligation to practise for three years on your PEM

Since July 1, 2021, performing a fellowship in Quebec has carried with it a rule whereby the candidate will have to practise for three years in the setting that granted him a position (PEM) in connection with his fellowship. Indeed, a clause to that effect on page 3 of the fellowship application form must be signed by the applicant. In the same perspective, the establishments undertake not to solicit a candidate who already has a commitment with respect to his fellowship/further training for three years following that training.

FURTHER TRAINING/FELLOWSHIPS IN QUEBEC

To obtain a position in a university setting

To obtain a position in a university setting, 3 to 12 months' further training/fellowship is required, but the duration of this training is usually from at least 1 year and up to 3 years, depending on the requirements of the faculty and discipline concerned. The purpose of fellowships is to acquire ultraspecialized clinical expertise surpassing the usual requirements of training in the specialty or subspecialty, along with the development of competencies in teaching, research, and evaluation of technology and intervention methods. Any proposed fellowship to be carried out in Quebec required for a position in a university setting must be supported by the recruiting establishment (Medical and Professional Services Director [DMSP]) and the medical faculty concerned.

IMPORTANT

- Your fellowship must be carried out in a facility of a university network other than the network where you performed your residency.
- In the case of a fellowship for recruitment in an establishment with university designation, the faculty submitting your application is the one where you will be recruited once the fellowship is completed.
- You may also perform a fellowship in the university network that offered you a position, although usually the practice sites want you to bring different expertise to meet the needs in the team.

Fellowships in specialties paid by RAMQ, in brief

- **Complete the** fellowship application **form** (available on the FMRQ site under Positions (PEMs/PTEMs) then Other specialties);
- **Before having it signed**, email the form to the Office of the Associate Dean for Postgraduate Medical Education of the faculty concerned for validation and confirmation that everything is complete and in order;
- Once it is validated, **print out the form and obtain the necessary signatures**;
- **In the case of an application for university or non-university recruitment**, the MSSS requires that your PEM be confirmed, and that **your application be accompanied by the letter of confirmation from the DMSP for your recruitment and from the Board of Directors of the establishment recruiting you**. Failing this, your application could be denied;
- **In the case of a PEM linked to the retirement** of a physician, a letter from that doctor confirming the effective date of his retirement is required;
- **When you have all the signatures, email the form, in a single PDF file, with the letter and other required documents**;
- **Incomplete applications will not be considered**;
- **Confirmation** of your fellowship will be emailed to you by the MSSS early in March preceding the start of your fellowship;
- **Upon receipt of this positive response**, you will be invited by the Office of the Associate Dean for Postgraduate Medical Education to complete your application for admission online and, as applicable, to forward the documents required for your admission file;
- **The deadline for submitting an application to the Office of the Associate Dean concerned is on or about November 27, 2027 for fellowships starting on July 1, 2027. Keep an eye on your emails or consult your faculty's website for further details.**

Time frame for applications for fellowship positions for July 2027

- DEADLINE FOR SUBMITTING APPLICATIONS TO FACULTIES
  NOVEMBER 27, 2026, 23:59
- Review of all applications by associate deans for postgraduate medical education and transmittal to MSSS
  mid-December 2026
- Transmittal of files to MSSS
  December 31, 2026
- Review of files by MSSS and emailing of results to candidates by Ministry
  no later than March 1, 2027
- Start of fellowship
  July 1, 2027

For obtaining a position in a non-university setting/1 year and less than six months
Fellowships for obtaining a position in a non-university setting may be of less than 12 months' duration. They must be supported by a medical faculty, and the candidate must hold a position in a PEM to be able to perform such training in Quebec. In the case of a fellowship for recruitment in a non-university setting, the faculty submitting the application is the one where the candidate will be performing his training, and not the recruiting establishment. Training of less than six months' duration does not require confirmation of a PEM, and is negotiated directly with the faculty authorities (program directors, associate deans). We invite you to consult your faculty about the rules established concerning the process for obtaining these extensions of training.

Time frame for applications for fellowship positions of less than six months' duration

- Deadline for submitting applications to faculties
  January 28, 2027, 23:59
- Meeting of associate deans to review files
  mid-February 2027
- Confirmation of positions to candidates
  March 2027

EXTENSIONS OF TRAINING

Any application for an extension of training other than a fellowship must be sent to the Office of the Associate Dean for Postgraduate Medical Education of the medical faculty where you intend to perform your extension of training and, as applicable, the home medical faculty of the hospital establishment that will be recruiting you when you have completed that extended training. It is not necessary to hold a PEM to be authorized to perform this training, but a position must be available for you in line with the quotas imposed by the MSSS, without exceeding the maximum number of positions authorized in each program, category, and subcategory, as determined by the government decree to that effect.

Exceptions

Extensions of training targeting Enhanced Skills in Emergency Medicine and Adult Critical Care Medicine, and specialized training in Pediatrics whose matching is handled by CaRMS, are not subject to this procedure.

To access the instructions and application form for fellowships and extension of training, you may consult the following sites:

Fédération des médecins résidents du Québec
fmrq.qc.ca/en/postgraduate-training

University of Montreal
medpostdoc.umontreal.ca/etudiants/reglement-et-politiques/poursuites-de-formation-et-demandes-de-formation-complementaires/

McGill University
www.mcgill.ca/pgme/residency-programs/admissions/poursuite-de-formation

Laval University
Email the **Postgraduate Medical Education Advisor** at gestionempd@fmed.ulaval.ca

University of Sherbrooke
Contact **Jean-François Duval**, Co-ordinator of Postgraduate Medical Education, in the Office of the Secretary of the Associate Dean for Postgraduate Medical Education by emailing jean-francois.duval@usherbrooke.ca

No fellowships not paid for by RAMQ may be performed in Quebec

Physicians having done their pre-MD or postgraduate (residency) training in medicine in Quebec who wish to perform a fellowship in Quebec have to obtain a position from among those authorized by the MSSS for which the pay is covered by RAMQ. Failing that, those doctors will have to look for fellowships in another province, the United States, or elsewhere. This rule is contained in the Ministry's Terms and conditions for determining resident physician positions (*Modalités de détermination des postes de résidents en médecine*). It reflects the MSSS's wish that the Quebec government limit fellowships performed in Quebec in line with the population's needs and encourage training outside the system where candidates have already undergone their training. Note that, as is the case elsewhere, Quebec establishments may offer fellowships to candidates trained outside Canada, but without any funding from RAMQ in such cases. Those undertaking such training cannot be hired by a Quebec establishment within three years after completing their extension of training/fellowship, unles they can argue exceptional cirumstances. For more information on this topic, email the FMRQ at pem-sp@fmrq.qc.ca.

CAREER IN RESEARCH

Royal College Clinician Investigator Program

Applications for admission to the Royal College of Physicians and Surgeons of Canada (RCPSC) Clinician Investigator Program do not require the DMSP's signature or confirmation of a position in a PEM. But they are subject to a specific process, the rules for which vary slightly from one faculty to another. This program offers integrated, structured, rigorous research training during residency, with a view to a career as a clinician investigator. **There are three possible streams or pathways:**

- Continuous training pathway, involving 24 months of continuous research starting in the final year of the specialty program (PGY-5 for a 5-year program, PGY-6 for a 6-year program) and running for 1 year after the end of the specialty program;
- Discontinuous training pathway, involving research distributed over a 27-month period that can begin from the first year of residency, for resident doctors who already have an MSc or PhD;
- Fractionated training pathway, involving 24 months of training in blocks of 3 months or more starting in the second or third year of residency, and one continuous 1-year block after the end of the specialty program.

Research fields do not concern only the traditional aspects of clinical and laboratory-based biomedical research, but also cover such disciplines as the economy, management, social science, and behavioural and information science as they apply to health and disease. Resident doctors successfully completing this program receive a Diploma of Specialized Studies (*Diplôme d'études spécialisées*) from the university and a Certificate from the Royal College of Physicians and Surgeons of Canada (RCPSC). Candidates have to register in an MSc or PhD program, unless they have already obtained such a degree in the past. Resident doctors are paid normally during the specialty program and during the year of extended training.

Procedure (example)

- Complete the admission form for the RCPSC's Clinician Investigator Program;
- Forward the form and the required documents to the Office of the Associate Dean for Postgraduate Medical Education by the deadline (January 15 for the academic year beginning the following July 1);
- The documents will be sent on to the program concerned;
- The program Admissions Committee will review the application, determine whether it grants an interview, and make its recommendation to the faculty, which will notify the candidate of the decision;

- Required documents for a clinician investigator fellowship application include:
  - a letter of intent;
  - an application form for admission to the Clinician Investigator Program;
  - a letter from the specialty program director;
  - a letter from the professor who undertakes to direct the candidate;
  - a copy of the candidate's up-to-date Canadian Common CV (CCV); and
  - an official transcript of university courses taken, excluding the MD.

For further information, consult the Royal College site at news.royalcollege.ca/content/dam/documents/ibd/clinician-investigator-program/clinician_investigator_program_otr_e.html.

Quebec health research fund (*Fonds de recherche du Québec – Santé*, or FRQS) research scientists

Research scientist positions are intended for specialist physicians signing onto the Memorandum of understanding concerning the establishment of special pay terms and conditions for research scientists (*Protocole d'accord concernant la mise en place de modalités de rémunération particulière pour les chercheurs-boursiers*). Any doctor wishing to perform a fellowship to obtain such a position must hold a compliance notice in the establishment where he wishes to practise. Should the doctor withdraw from the Memorandum of understanding, he must take a position available in his original specialty or subspecialty. If the PEM is full, he will be considered surplus to the PEM until the next departure of a resource in the same specialty.

For full details concerning the FRQS/MSSS training program for specialty medicine residents with an interest in pursuing a research career, consult the FRQS site at frq.gouv.qc.ca/en/open-competitions.

FELLOWSHIPS OUTSIDE QUEBEC

The MSSS does not fund fellowships outside Quebec, because doctors on such fellowships do not deliver care to Quebecers during this additional training. Candidates for that type of fellowship must obtain funding through their own devices (establishment where they will be training, hospital department where they intend to return to practise, bursaries from organizations and foundations, bank loans, etc.). Nevertheless, although obtaining a position is not a prerequisite, it is preferable to obtain a PEM prior to your departure confirming that you will be joining an establishment in Quebec. Otherwise, you cannot be guaranteed a position on your return.

Fellowships elsewhere in Canada

Those planning to pursue further training in another province enjoy certain benefits, though. Such training may be paid, either through non-taxable bursaries from the establishment or from funds awarded by the fellowship director. It is also much easier to obtain a permit to practise in the province in question, as Royal College specialist certification is recognized Canada-wide. So you can practise part-time, by moonlighting, and that provides an additional source of funding. Moreover, health insurance coverage for you and your family is much simpler to confirm, as provincial health insurance programs are recognized across Canada, and the school system is more easily accessible for children.

Fellowships in the United States

To perform a fellowship in the United States, you must find out from the Medical Board (College of Physicians) of the state concerned what the requirements are for doctors from outside the United States. If you have to perform medical acts, you will have to make sure you have the permit appropriate to this practice, and the malpractice insurance coverage that will enable you to practise without any concern.

United States Medical Licensing Examination (USMLE)

The basic exam you must pass to obtain a permit to practise medicine in the United States, the USMLE can be required of doctors performing further training in the U.S., but this requirement is not mandatory in all states. For more information on the requirements concerning the exam, consult the 2027 Bulletin of Information on the USMLE site at www.usmle.org/bulletin-information.

To find out the requirements for practising in the U.S. state where you will be performing your fellowship, you may get in touch with the Medical Board (College of Physicians) of the state concerned (see list on the Federation of State Medical Boards website): www.fsmb.org/contact-a-state-medical-board.

Fellowships in France

The procedure for performing a fellowship in France involves steps specific to that country. Training is usually of 3 months' to a maximum of 2 years' duration. The official procedure for obtaining temporary authorization to practise from the French authorities is carried out by the host establishment. No applications from individuals directly to the French authorities are accepted.

The application for temporary authorization to practise file consists of:

- the commitment to host from the French host establishment;
- a photocopy of their ID;
- a copy of the specialist physician's training credentials;
- their resumé;
- certification from the competent authorities in their home country specifying that their credentials entitle them to practise the specialty in that country;
- their fellowship proposal, in which the link with the specialty is stated;
- an extract from their criminal record or equivalent document, issued less than three months earlier by a competent authority in their home country or country of origin;
- an extract from their police record in France;
- certification of successful completion of the French-language test (unless exempted).

For more information, consult the site *Le fellowship : ou autorisation temporaire d'exercice* www.cng.sante.fr/procedures-dautorisation-dexercice/venir-exercer-se-former-en-france/fellowship-autorisation-temporaire-dexercice.

You may also consult the Social Affairs, Regional World Health and/or Cooperation and Cultural Action Counsellors at the French Consulate General in Montreal or the French Embassy in Ottawa.

Fellowships in other countries

We suggest you initiate matters well ahead of time if you want to perform a fellowship abroad, including the United States. Each venue has different rules. Ideally, you should visit ahead of time, to meet with the fellowship director and the team you would have to work with in the context of your further training. That being said, interviews are increasingly being conducted via Skype, ZOOM, or other platforms.

For further details, **consult the personal accounts on our website (fmrq.qc.ca/en/postgraduate-training/extension-of-training-other-specialties/outside-quebec/personal-accounts) from colleagues who have completed or are performing fellowships outside Quebec**.

Other aspects to consider

Permit to practise/malpractice insurance

To deliver care in another jurisdiction, you will first have to obtain a permit to practise there. Contact the Medical Board or College of Physicians in the U.S. state, for instance, or the country concerned, or the establishment, to find out the requirements in this regard. You will also have to take out malpractice insurance coverage that meets the requirements of the state or country concerned. The medical authorities in the country or the establishment will be able to guide you in this. Unfortunately, the Canadian Medical Protective Association (CMPA) does not cover medical acts performed outside Canada.

Health insurance coverage

Find out from the Quebec Health Insurance Board (RAMQ) whether you will be covered during your stay outside Canada. Although RAMQ's coverage is insufficient, it is still necessary. To cover any additional costs, you can take out health insurance coverage on-site, through the department or establishment where you will be pursuing your training. They can usually include you in the insurance programs in effect for resident doctors or staff physicians on-site, as applicable. In the United Kingdom, for instance, you cannot be covered by RAMQ if your stay is for more than two years and you are paid by the local establishment.

Work visa

You will need a work visa in the country where you perform your fellowship. Make sure you apply in advance to the embassy, high commission, or consulate concerned. Also, if your spouse is to accompany you on your fellowship, make sure they have a visa allowing them to stay there with you beyond the period allowed for a tourist—six months in the USA, for instance. You will have to find out, too, about the rules concerning the possibility of you or your spouse working during this visit. Some countries, such as the U.S., are very strict about this, and a job that does not comply with the rules could lead to your expulsion from the program, and the country.

Home and automobile insurance

To insure your property in the host country, check with your insurance company whether there are comparable firms there, or get in touch with FMSQ subsidiary and FMRQ partners, SOGEMEC Assurances, who offer special services in such cases. You can reach them at 514-350-7070 or 1-800-361-5303, or consult their website at sogemec.com/en/professionals/medical-specialist/home.

Driver's licence

As a general rule, you will also have to obtain a driver's licence from the jurisdiction where you will be pursuing your further training. You could be asked to pass a new driving test. You may check, too, whether obtaining an International Driving Permit (available from the CAA, for example) is sufficient for compliance with the rules in effect where you will be doing your training. Some states do, however, recognize the Quebec driver's licence.

Bank account/Power of attorney

You will need a bank account in Quebec to perform transactions toward your host country, especially if your remuneration comes from Quebec and is paid directly into your account here. You are also advised to identify someone close to you to whom you will give power of attorney to manage some of your affairs in Quebec, as necessary.

Alternative funding sources

Funding sources for those pursuing further training outside Quebec include the following:

- Training or research grants
  - Specialist physician associations in Quebec and Canada
  - Canadian Medical Association
  - Royal College of Physicians and Surgeons of Canada (RCPSC)
  - Medical product and equipment companies
  - Specialist physician association foundations
  - Private medical foundations (particularly in connection with research)
  - Quebec health research fund (*Fonds de recherche du Québec – Santé*, or FRQS)
  - Hospitals hosting you (department or other)
  - Canadian Institutes of Health Research (CIHR)
  - Universities
- Grants from the department to which you will be returning after your fellowship
- Bank loans

Some further tips

- Obtain confirmation of your notice of appointment (PEM) before you leave, if possible;
- Plan prior visits to the team with whom you hope to perform your fellowship;
- Take steps to agree on funding sources available here and abroad;
- Acquire certified true copies of your diplomas and other academic documents. You might have to demonstrate that you are a licentiate of the Medical Council of Canada and, in some cases, that you have passed the United States Medical Licensing Examination (USMLE), depending on the requirements of the state concerned;
- Ensure you have an up-to-date passport, and obtain your visitor's visa;
- Obtain your permit to practise from the country or U.S. state concerned;
- Take out malpractice insurance coverage consistent with the requirements of the further training site.

FINANCIAL INCENTIVES IN NON-FM SPECIALTIES ON STARTING OUT IN PRACTICE

Specialist physicians who choose to set up in remote and isolated regions have their remuneration increased. Availability premiums are also offered. In addition, professional development and retention premiums, enhancement bonuses, and establishment and maintenance premiums are awarded by the Ministry. These vary depending on the practice location. The annual maintenance premium cannot exceed the amount of an annual bursary and varies in line with the length of retention, the isolated area in question, and available regional budgets. Each establishment and maintenance premium comes with the obligation for the physician to practise for one year in an area with an insufficient supply of physician resources. Some enjoy additional benefits, such as annual remote area/isolation bonuses depending on the physician's personal situation—spouse, number of children, etc.—home leave expenses, and moving expenses.

Isolated areas

Specialist physicians at all times receive 145% of their basic remuneration for the services they provide in these areas, whether in a context of itinerancy, support, or replacement, in an office, or in an establishment in isolated areas defined as sectors 3, 4 and 5 in Appendix 20 of the Master Agreement, and at the Chibougamau health centre.

Remote areas

A more advantageous increase over the basic remuneration is provided for specialist physicians who practise primarily in an establishment on a regular, ongoing basis in the different territories, as specified in Article 1.2.4 of Appendix 19 of the (French only) FMSQ-MSSS Master Agreement, which may be downloaded at: www.ramq.gouv.qc.ca/SiteCollectionDocuments/professionnels/manuels/syra/medecins-specialistes/154-brochure-1-specialistes/Specialistes_Brochure_no1.html.



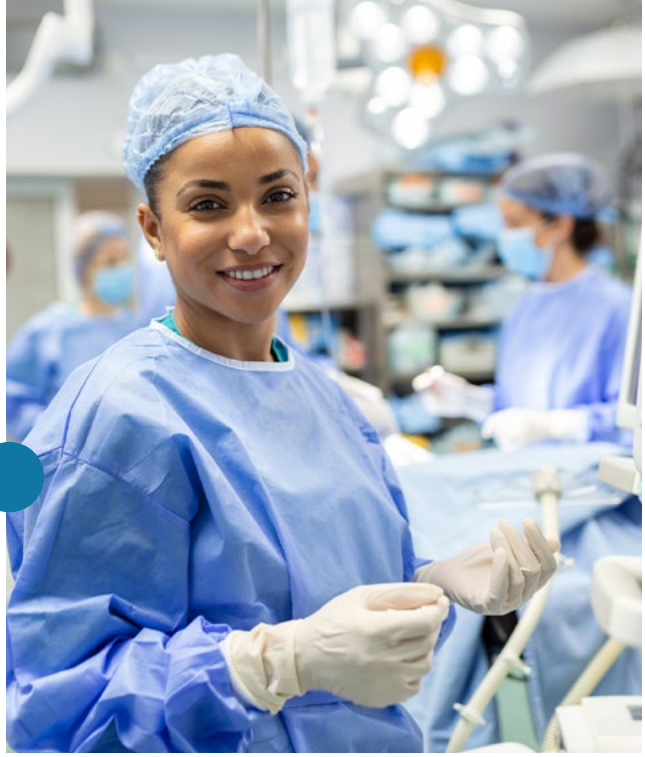




A commitment to fighting climate change

For the sixth consecutive year, the FMRQ offset its greenhouse gas (GHG) emissions by purchasing carbon credits following a comprehensive assessment of its carbon footprint over the past 12 months. In doing so, the FMRQ supported three organizations: **Carbone boréal**, a GHG offset program involving tree planting and research infrastructure at UQAC; **Carbone Scol'ERE**, an environmental education program for students in grades 4 through 6; and **Portefeuille Planetair Mondial**, which supports various Gold Standard-certified climate projects involving solar and wind energy production, improved cookstoves, and optimized waste management.

3. PRACTICE



REGULAR PERMIT

If you are planning to complete your training on June 30 of the current year, you must submit your permit to practise application to the *Collège des médecins du Québec* (CMQ) **no later than May 1, 2027**. The CMQ requires applications to be submitted early enough to ensure it is able to issue permits to practise to all terminating residents in time for their start of practice, July 1. This application is completed online.

Steps

Permit application

- Complete the form available at www.inscriptionmed.ca;
- Send the Collège all the documents required on the form, along with a cheque for the permit to practise application ($900 in 2026-2027);
- An additional $175 fee is added if you receive a second specialist certificate (Internal Medicine + Cardiology), and if you hold a regular permit in family medicine and obtain a specialist certificate;
- **For further details on the rates for 2026-2027 (effective April 1, 2026), consult the Collège site at** www.cmq.org/page/fr/grille-tarifs.aspx.

Registration on the Collège membership roll

- You will receive your permit number by email;
- When you have received it, you must complete the notice of assessment form (First registration on the membership roll) available online at www.cmq.org/page/fr/premiere-inscription-au-tableau.aspx;
- Include payment (by cheque or credit card) in the amount of the annual membership fee ($1,938.00 as at April 1, 2026). Those registering after July 1 pay reduced fees, while those registering after October 1 pay about half the annual fee.
- Your permit will be forwarded to you no less than one week before the scheduled date for completion of your training;
- A $37.60 fee is payable for registration with the Quebec Professions Board (*Office des professions*);
- **In the event you fail the exam**, the CMQ will reimburse you for the payment made to have the permit issued;
- Certificate of professional conduct, where required ($240);
- For any question concerning the permit to practise from the *Collège des médecins du Québec*, **email demandepermis@cmq.org or call 514-933-4253**.

Malpractice insurance

- You absolutely must take out malpractice insurance when you start out in practice;
- To do so, you must get in touch with the Canadian Medical Protective Association (CMPA) via www.cmpa-acpm.ca. Tariffs are established on the basis of your specialty and the region (Quebec-Ontario-Other) where you will be practising. For details on how to apply for coverage, consult the CMPA site at: www.cmpa-acpm.ca/en/become-a-member/how-to-apply;
- The insurance coverage you had during your residency terminates when you have completed your training, but remains valid for any legal action associated with a medical act performed during your residency, for your entire career.

ALDO-Quebec (mandatory training)

To obtain your permit, you also have to have attended a three-hour ALDO-Quebec training session, given by the *Collège des médecins du Québec*, on the **legal, ethical, and organizational aspects of medical practice in Quebec**. This training is mandatory for doctors wishing to practise in Quebec. It is available in French only and can be taken at any time during residency. It is given twice a month, in the three university cities (Montreal, Quebec City, and Sherbrooke). The cost of this training is $205 (2026-2027). For a list of dates and locations and to register, visit the *Collège* site at www.cmq.org/fr/acceder-a-la-profession/demande-de-permis/aldo-quebec. You must register at least one month prior to the training activity to avoid additional fees.

Billing

For billing purposes, you must register with the Quebec Health Insurance Board (RAMQ). When you have obtained your permit number, the Collège will send that information to RAMQ, which will then send you a letter with a personal identification number (PIN) that you will be able to use to register online for the Board's fee payment services. To complete your registration, you will also have to provide them with a copy of your malpractice insurance certificate.

For those deferring the start of their practice (fellowship or other)

You can obtain your regular permit to practise as soon as you complete your training, if you wish, without registering on the Membership Roll or paying your membership fees, if you do not intend to practise in Quebec immediately. In that case, the only fees you will have to pay will be those associated with obtaining the permit to practise. The permit is paid for only once, at the start of practice.

For further information and to access the forms, go to the *Collège* site at www.cmq.org and click on *Pour accéder à la profession/Demande de permis*. You may also get in touch with the CMQ Permits Section by calling 514-933-4253 or 1-888-MEDECIN, or emailing demandepermis@cmq.org.

MOONLIGHTING

Moonlighting is reserved for resident doctors holding a first certification for which they can seek a regular permit to practise. **That means PGY-3s in Family Medicine, PGY-5s in Internal Medicine and Pediatrics, and PGY-6s and higher who have completed their residency and are on fellowships**. To obtain their regular permit to practise, eligible resident doctors should apply to the Permits Section of the Collège des médecins du Québec.

Resident doctors holding a regular permit who take advantage of this opportunity can perform moonlighting in all Quebec establishments with a PEM that is not full, except the establishment where they are on rotation at that time. This rule stems from the *Act respecting health services and social services*, which stipulates that a doctor cannot have dual status in a healthcare facility. Furthermore, if you perform a fellowship and already hold a PEM in a Quebec healthcare facility, you may perform moonlighting on your own PEM, provided it is in effect before the date on which you ultimately start your practice.

In addition to the permit to practise, you must take out **supplementary malpractice insurance** with the Canadian Medical Protective Association (CMPA) if you perform moonlighting, because the insurance coverage you have for your residency is not valid for moonlighting. You will find information about this on the CMPA site at www.cmpa-acpm.ca (click on the My Membership tab). You will also have to register with the Quebec Health Insurance Board (RAMQ), which you will bill for medical acts performed and other charges, in line with the tariffs in effect for physicians in your specialty and the billing mode agreed upon within the department (fee-for-service, mixed, etc.). For further information on establishments' needs if you are in family medicine, consult the provincial *Centre national Médecins-Québec* (CNMQ) website or call the *Fédération des médecins omnipraticiens du Québec* at 514-878-1911 or 1-800-361-8499 for information concerning locums. For those of you training in another specialty, *Santé Québec* publishes a list of establishments with major resource needs (*établissements en besoin important d'effectifs*, or EBI) which outlines needs in the medical and surgical disciplines in different Quebec facilities.

IMPORTANT

When you have received your permit to practise, you must use this practice number when you perform moonlighting. When you are on rotation, you use your resident doctor registration number (R-XXXXX).

To access the **list of establishments with major physician resource needs (*établissements en besoin important d'effectifs médicaux*, or EBI)**, conduct an Internet search for "*PEM en spécialité*" and select that item.



In line with our Policy for Socially and Ecologically Responsible Action, the *Bulletin* is no longer automatically mailed out to members. An electronic version is available at all times via the FMRQ's mobile app and on our website.

If you no longer wish to receive the Bulletin by mail, please let us know at desabonnement@fmrq.qc.ca.

MANDATORY CONTINUOUS EDUCATION FROM DATE OF REGISTRATION ON MEMBERSHIP ROLL

Since January 1, 2019, all physicians registered as active members on the Membership Roll (*Tableau de l'Ordre*) of the *Collège des médecins du Québec* (CMQ) have been subject to the regulation concerning mandatory continuous education from the day of their registration on the Roll. Activities carried out prior to that date are not counted in the continuous education declaration.

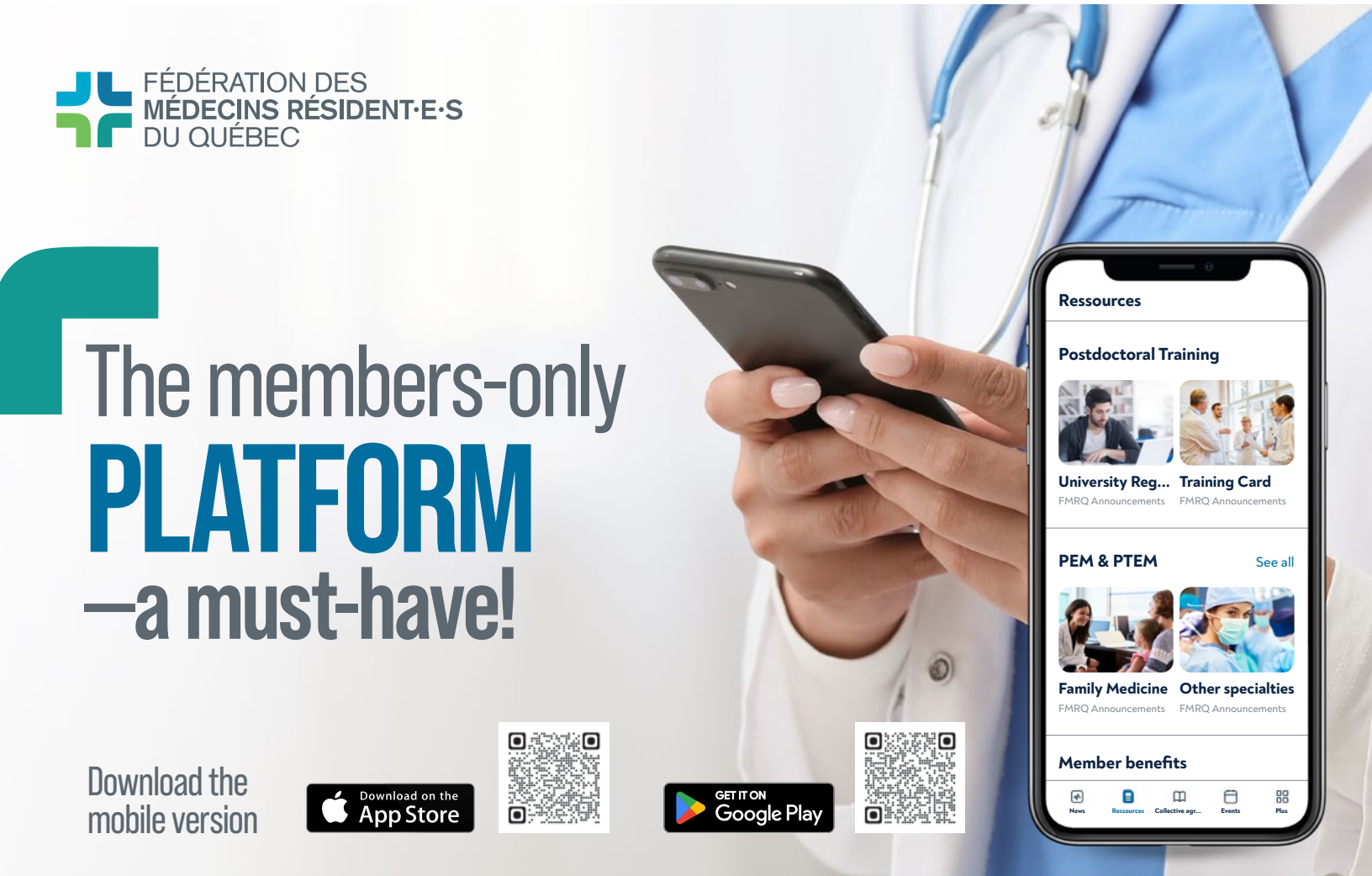
After registering on the CMQ Membership Roll, each doctor has to choose which platform to use to declare their continuous education activities: FMOQ, CFPC, FMSQ, RCPSC, or CMQ.

A waiver may be granted to a physician registered on the Membership Roll who:

- Is starting out in professional practice and has pursued postgraduate training or a fellowship in a program accredited by the CMQ, CFPC, RCPSC, or ACGME for at least six consecutive months during the calendar year of his registration.
- Is a practising physician performing postgraduate training or a fellowship.
- Is on maternity, paternity, or parental leave.
- Has ceased all professional activities for reasons of health.

On the day of registration on the CMQ Membership Roll, the web page concerning continuous education waivers and the necessary form become available on clicking on the *Accès M.D.* tab on the CMQ home page, and the continuous education requirements are displayed.

For any question concerning the continuous education declaration, write to fco@cmq.org.



4.



CERTIFICATION EXAMS

FAMILY MEDICINE

For information concerning family medicine exam dates and fees, consult the College of Family Physicians of Canada (CFPC) site at www.cfpc.ca/en/home under Exams, Education & CPD/Examinations and Certification. Keep an eye on the site and your electronic inbox for more information in that regard.

OTHER SPECIALTIES

To find out the deadlines for registering for non-FM specialty exams and forwarding your applications for preliminary assessment or an application for final assessment, go to the Royal College of Physicians and Surgeons of Canada (RCPSC) site at www.royalcollege.ca and click on the *Eligibility & Exams* tab, followed by *Exam* process, then *Assessment and exam fees*. First, you will have to submit an application to the RCPSC for assessment of your postgraduate education. **To do so, you must contact the Royal College Credentials Unit at least one year before sitting the exams**. Submit your application well before the deadline for your specialty, so as to avoid late payment fees. The assessment usually takes six months, but can take longer, and there are fees associated with it. On the Royal College website (www.royalcollege.ca), click on the *Eligibility & Exams* tab. The spring and fall 2027 exam schedule is available on the site.

Exam accommodation

The Royal College will attempt to accommodate candidates with specific requirements for the examination provided that the validity of the examination is maintained. Accommodations will be granted on an individual basis and depend on the nature and extent of the special requirement, documentation provided, and the requirements of the examination. **Applicants who require particular consideration or accommodation at the examination must notify the Office of Specialty Education by November 4, for the spring examinations, or April 15, for the fall exams.** For further information, consult the Royal College site. For access to exam accommodations, candidates must provide the following documents to the Royal College by the registration deadline:

- A signed letter with a description of your need for accommodation and its severity, along with a description of the type of accommodation required;
- Documentation of the accommodations provided by your university or other medical education programs, if you have been granted previous accommodations;
- Supporting documentation from a qualified treating professional confirming the need for accommodation, its severity, your functional limitations and specific recommendations for the accommodation. All supporting documentation must be provided on office letterhead, from your fully licensed practising physician, clinical psychologist, or other appropriate licensed health care provider (the practitioner cannot be a relative or spouse);
- Written confirmation is required from a qualified professional that your functional limitations are still valid should the supporting documentation be more than two years old.

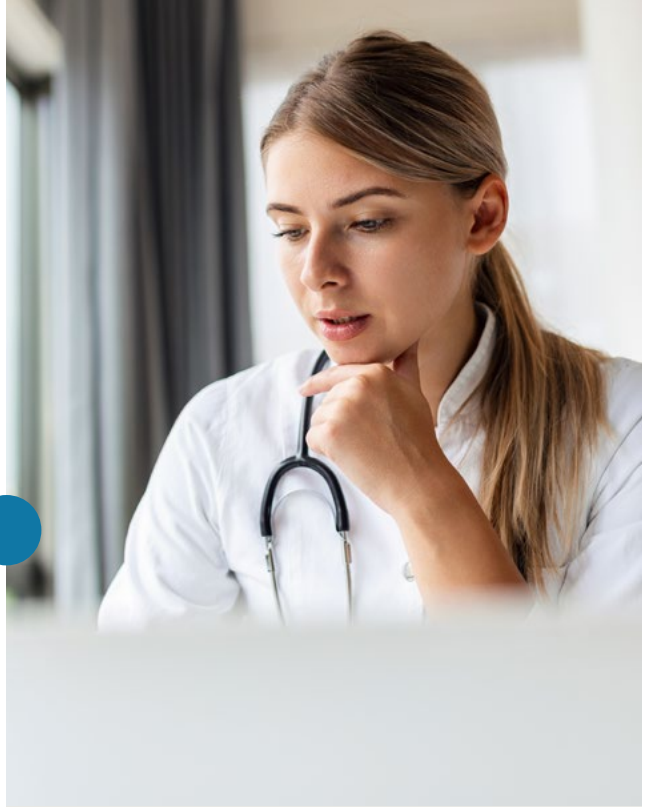
PREGNANCY LATE IN RESIDENCY AND FINAL EXAMS

Maternity or paternity leave involves extending the residency program by a period of time equivalent to the duration of the leave. In such a case, we suggest you bear in mind the specific rules of the *Collège des médecins du Québec* and the Canadian colleges concerning exam dates for certification in specialties and family medicine.

HELPFUL TIP: BEWARE OF PROMISES

Do not count on positions promised by your staff physicians or department heads. Even if these promises are made in good faith, if there is no PEM available in the facility or establishment concerned, you will not have access to the position you seek.

5.



REMUNERATION AND BILLING

MODES OF REMUNERATION

Different modes of remuneration have been adopted in Quebec, both in family medicine and in other specialties: **fee-for-service, fixed fee, hourly rate, lump sum, per diem, mixed (fee-for-service + per diem), and salary**. There is also remuneration geared specifically to research scientists in specialties. Normally, you will be subject to the remuneration mode in effect in your chosen practice setting. For instance, salary is the mode in effect in CLSCs, while mixed remuneration is seen in certain specialties, depending on the establishment. Make sure that the mode of remuneration in effect in the establishment or clinic you wish to be associated with suits you.

REGISTRATION WITH RAMQ

In order to receive this remuneration, you will have to register with the Quebec Health Insurance Board (RAMQ) as a new biller. When the *Collège des médecins du Québec* (CMQ) grants you your permit to practise, you will receive a note from RAMQ with a personal identification number (PIN) to register online with the RAMQ fee payment department. If you already hold a regular permit associated with a first certification, you will have to modify your status so you can bill in your subspecialty. You can register or make changes by completing the French-only form available on the RAMQ site (www.ramq.gouv.qc.ca/fr/professionnels), in the *Services aux professionnels* section. This registration serves to confirm your practice location and your address for correspondence for payment purposes.

FMOQ AND FMSQ MASTER AGREEMENTS

The amounts allocated for family doctors and specialist physicians are based on the Master Agreements between the Ministry and the *Fédération des médecins omnipraticiens du Québec* (FMOQ) and Fédération *des médecins spécialistes du Québec* (FMSQ), respectively. You may consult the billing guide and all the associated letters of understanding on the RAMQ site: go to *Services aux professionnels*, click on *Médecins omnipraticiens or Médecins spécialistes*, and then on *Facturation*.

JOINING THE *FÉDÉRATION DES MÉDECINS SPÉCIALISTES DU QUÉBEC*

Technically, you do not have to do anything to join the *Fédération des médecins spécialistes du Québec*. We strongly recommend, however, that you send a valid email address to the FMSQ (info@fmsq.org) or your medical association a few weeks before you start practising in specialized medicine, to ensure that your personal information is up to date.

Your membership in the FMSQ will take place automatically as soon as you practise in the Quebec public health system and are paid by RAMQ. In fact, once you start invoicing acts as a specialist physician, RAMQ will deduct the membership fees and forward them to the FMSQ. Note, however, that there is a one-month delay between when you start invoicing and when the FMSQ receives your first fees, so you will become an active member of that Federation only the month following your first fee payment.

JOINING THE *FÉDÉRATION DES MÉDECINS OMNIPRATICIENS DU QUÉBEC*

The FMOQ is a group of legally autonomous associations. You must contact your regional association to become a member in good standing of the FMOQ and benefit from your association's services. You will then be able to vote in the FMOQ presidential elections and ratify framework agreements relating to the renewal of the General Agreement. To become a member, you must go through the membership process put forward by each of the affiliated associations. You must therefore contact the association in your geographical area. For physicians working in CLSCs, you can contact the Association of CLSC Physicians of Quebec (AMCLSCQ). To access the list: https://www.fmoq.org/fmoq/associations/

BILLING AGENCIES

Most practising physicians use the services of billing agencies to help them in this regard. A list of such agencies (www.ramq.gouv.qc.ca/fr/professionnels/agence-facturation/liste-agences-facturation) is available on the RAMQ site, in the section reserved for professionals. You may also consult colleagues in your department, who will be able to advise you on this.

RESEARCH SCIENTISTS IN SPECIALTIES

The conditions of remuneration for research scientists in specialties take into account the average annual remuneration in the specialties of the research scientists concerned. This remuneration is equivalent to the percentage of time devoted to research (50% of time devoted to research = 50% of average annual remuneration in the specialty concerned). The doctor can also bill RAMQ for clinical activities on a fee-for-service basis. But the total remuneration that can be received by a physician for his clinical and research activities is limited to 110% of the average for his specialty. For further details, contact the FMSQ by calling 514-350-5000 or 1-800-561-0703, or emailing info@fmsq.org.

MALPRACTICE INSURANCE

Upon completion of your residency, you will cease to be covered by the malpractice insurance included in the FMRQ's collective agreement, so you will have to take out coverage with another organization. Most physicians in Canada are insured by the Canadian Medical Protective Association (CMPA). You can sign up with the CMPA by telephone, email or online. Registration procedures and forms along with a list of current rates for each specialty are to be found on the CMPA site at www.cmpa-acpm.ca, under Membership. We suggest you take steps at least one month before the end of your residency, to make sure you are covered as soon as you start your autonomous practice. Note that, while premiums are high, on the basis of risk, particularly in certain specialties, part of this cost is reimbursed by the Quebec Health Insurance Board (RAMQ) under clauses in the FMOQ and FMSQ Master Agreements.

Coverage for acts performed during residency

We remind you that the malpractice insurance you had during your residency will cover you for life for any medical act performed during residency for which legal action is taken against you in the future. Only complaints of an administrative nature filed with the *Collège des médecins du Québec* (CMQ) or a hospital are not covered by this insurance after the end of your residency.

INCORPORATION

Physicians wishing to incorporate their practice are subject to different rules that are explained in the *Guide sur l'exercice de la profession médicale en société* (Guide on Practising the Medical Profession Within a Partnership or a Company), which is available, in French only, on the CMQ site at www.cmq.org/fr/pratiquer-la-medecine/exercice-societe. But that guide does not cover the accounting, legal, and fiscal aspects in any depth, in view of the large variety of situations that can arise. Incorporation offers two advantages: **tax deferral** through a corporation, since the tax rate on operating revenues is beneficial; and **income splitting**, notably payment of a dividend to the spouses and children 18 or over, leading to taxation in a lower bracket. For further information, get in touch with Professionals' Financial (fdp Private Wealth Management) and ask to speak with one of the advisors dedicated to young professionals, by emailing www.fprofessionnels.com/en/contact-us or calling one of the following numbers:

Montreal	514-350-5050 or 1-888-377-7337
Quebec City	418-658-4244 or 1-800-720-4244
Sherbrooke	819-564-0909 or 1-866-564-0909

EXTENDING LIFE, HEALTH, AND DISABILITY INSURANCE COVERAGE

Your group insurance coverage as a resident doctor with Beneva **will be deactivated at midnight on your last day of residency**. In order to comply with the Act respecting prescription drug insurance, you are **required thereafter to take out insurance coverage with any organization or federation (FMOQ or FMSQ) offering a group insurance plan for which you become eligible**.

For specialist physicians and family physicians, SOGEMEC Assurances offer a group drug insurance program along with life insurance, disability insurance, and office overhead insurance, without proof of good health, if you take out coverage within 180 days after you receive your permit to practise. For further information, call **SOGEMEC Assurances** at 514-350-5070 or 1-800-361-5303.

AUTOMOBILE AND HOME INSURANCE

Through our agreement with **TD Insurance**, you enjoy beneficial group rates as well as high-quality home and automobile insurance products. These services can be maintained or modified to suit you once you have completed your residency. For further information, call 514-384-1112 or 1-800-339-1847 or visit their site at www.tdinsurance.com/affinity/fmrq.

FINANCIAL SERVICES

The banking packages offered by RBC and Desjardins were specially designed to meet your needs during residency, but also in a perspective of continuity for the future. Those of you taking advantage of the package for resident doctors or any other benefit offered by these banking institutions will be able to maintain those services or modify them. To do so, you will have to contact your banking institution directly.

For RBC, call 1-800-80-SANTE (1-800-807-2683). You can also consult their website at www.rbcroyalbank.com/healthcare-financial-solutions/medical-dental-residents.html.

For Desjardins, call 514-875-4266 or 1-877-875-1118 or consult their website at www.desjardins.com/fmrq.

INCOME TAX

During residency, tax on your income was deducted at source by the employer. But during your first year of practice, you will receive pay from two different sources, owing to your change in status, part as an employee and part self-employed. So you must plan on setting aside an amount to cover the income tax for the second part of this first year of practice, where generally speaking you will be paid on a fee-for-service basis or through a hybrid formula. In addition, new deductions will be added, notably for books and scientific journals, participation in conferences, certification exam fees paid in the final year of training, and so on, and this could reduce your taxable income. In this context, we strongly suggest you call upon specialized resources, who will be able to advise you in this regard.

MATERNITY, PATERNITY, AND ADOPTION LEAVE WHILE IN PRACTICE

When you start out in practice, you will have access through the FMOQ and FMSQ to a paid maternity leave program.

For family physicians

Any family physician paid for all or part of his or her practice on a fee-for-service, hourly-rate, fixed-fee, or per-diem basis who has been practising for at least 20 weeks under the Quebec health insurance plan for services delivered in Quebec and expects to give birth or adopt is eligible for a maximum of 21 weeks' leave. Different conditions apply for doctors paid on a fixed honorarium. To find out more about maternity and adoption (fmoq.s3.amazonaws.com/pratique/etapes-de-carriere/ANNEXE_XVI-Allocation-Conge-de-maternite-ActeEtTH.pdf) leave for family physicians, you may consult the French-only FMOQ site. If you have any other questions, call the FMOQ at 514-878-1911 or 1-800-361-8499.

For specialist physicians

The FMSQ has offered a parental leave compensation program since 2011. The doctor has to have practised for a minimum of 10 weeks over the 12 months preceding the start of the leave. The benefit payable is applied over a maximum period of 12 weeks for maternity leave and 6 weeks for adoption or paternity leave. For more information on the benefits offered to specialist physicians on the birth or adoption of a child, you may consult the Ministry site, at www.ramq.gouv.qc.ca/fr/professionnels/medecins-specialistes/evenements-carriere/Pages/maternite-adoption.aspx or call the FMSQ at 514-350-5003.

Specialist physicians are entitled to a basic weekly benefit equivalent to 67% of their average weekly earnings from practice, up to a maximum of $3,000 per week. For specialist physicians with an active practice in a private office, there is an additional weekly benefit equivalent to 33% of their average weekly earnings from practice in an office, up to a maximum of $1,500 per week. This does not, however, apply to resident doctors with a valid PGY-5 or higher training card who hold a regular permit, since they are covered by the terms and conditions of the FMRQ collective agreement through the Quebec Parental Insurance Plan. Information on this is available on our site at www.fmrq.qc.ca and is explained in detail in the FMRQ-MSSS Collective Agreement.

INFORMATION SOURCES

FMRQ Career Day

The FMRQ holds its Career Day each year in the fall. **In 2026, the event took place on October 2, at Montreal's *Palais des congrès* convention centre**, with some 1,000 resident doctors taking part. All residents are released to attend this medical employment fair, which brings together most Quebec healthcare establishments, with no financial penalty and no penalty with respect to the validity of their current rotation (75%), pursuant to our collective agreement and an arrangement with the Quebec Conference of Associate Deans for Postgraduate Medical Education.

Family Medicine Resident Symposium

The Family Medicine Resident Symposium focusses on the process of obtaining a position in family medicine (PTEM) or a PEM in a hospital setting. It also gives participants an opportunity to learn about steps to be taken on starting out in practice. It is a yearly event, organized in conjunction with Fonds FMOQ since 2025. The event is aimed both at PGY-1s and those completing family medicine residency, who are released from their clinical duties with no financial or academic penalty in order to attend.

FMRQ Presentation Tour on positions (PEMs) in specialties

The FMRQ also offers presentations for resident doctors in non-FM specialties on the positions available and the procedure for obtaining a PEM. To confirm a presentation, email Johanne Carrier at tournee-pem-sp@fmrq.qc.ca.

Ministry of Health and Social Services (MSSS) website

Information on all positions contained in the physician resource plans (PEMs) is available at all times on the MSSS website, which is accessible through the FMRQ site at www.fmrq.qc.ca, by clicking on the Positions (PEMs/PTEMs) tab, then on Family Medicine or Other Specialties. The information on the MSSS site is updated at the beginning of each month. The three-year plan for non-FM specialties which came into effect in December 2025 is posted on the Ministry website at https://www.quebec.ca/gouvernement/travailler-gouvernement/sante-services-sociaux/travailler-comme-medecin-specialiste-quebec#c377650. A new three-year plan will be available December 2027.

***Fédération des médecins résident·e·s du Québec* website**

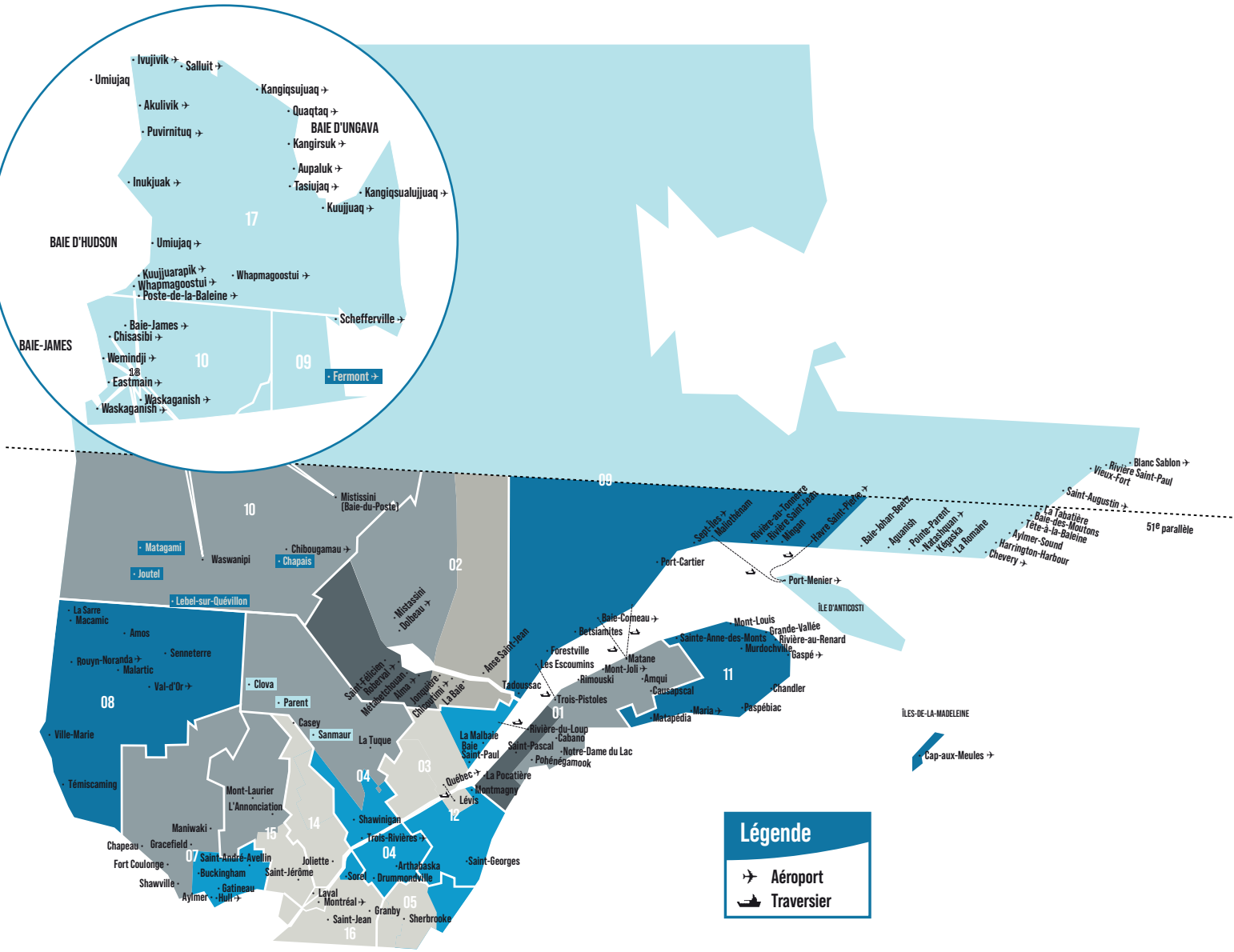
All information about obtaining a position in Quebec may be found on the FMRQ website at www.fmrq.qc.ca, by clicking on the Positions (PEMs/PTEMs) tab, then on Family Medicine or Other Specialties.

Personalized service from the FMRQ

Resident doctors seeking a position or looking for information concerning positions available in Quebec and the process for obtaining a PEM or PTEM in their discipline can email the FMRQ directly.

For positions in family medicine, email Geneviève Coiteux at ptem-mf@fmrq.qc.ca.

For positions in other specialties, email Johanne Carrier at pem-sp@fmrq.qc.ca.



REGION N^{0}

01 Bas-Saint-Laurent
02 Saguenay–Lac-Saint-Jean
03 Québec
04 Mauricie–Centre-du-Québec
05 Estrie
06 Montréal-Centre
07 Outaouais
08 Abitibi-Témiscamingue
09 Côte-Nord
10 Nord-du-Québec
11 Gaspésie–Îles-de-la-Madeleine
12 Chaudière-Appalaches
13 Laval
14 Lanaudière
15 Laurentides
16 Montérégie
17 Nunavik
18 Terres-cries-de-la-Baie-James

DIFFERENT REMUNERATION MAP FOR MEDICAL SPECIALISTS

SECTORS AND TERRITORIES FOR BILLING PURPOSES

DIFFERENTIAL PAY FOR SPECIALIST PHYSICIANS			
SECTORS III, IV, V	145%	TERRITORY 3	125%
TERRITORY 5	145%	TERRITORY 2	115%
TERRITORY 4	130%	TERRITORY 1	107%

SECTORS III, IV, V

TERRITORY 5

Région de l'Abitibi-Témiscamingue.
Région de la Côte-Nord, à l'exception des localités du secteur III des territoires isolés.
Région de la Gaspésie–Îles-de-la-Madeleine.
Localités des secteurs I et II qui ne sont pas comprises dans les territoires isolés précédents, à l'exception du Centre de santé Chibougamau.

TERRITORY 4

Dans la région du Saguenay–Lac-Saint-Jean, le territoire du CLSC Maria-Chapdelaine.
Dans la région du Bas-Saint-Laurent, les territoires de CLSC de Cabano,Saint-Éleuthère, Rimouski-Neigette, La Mitis, Les Basques, Matane et La Matapédia.
Dans la région de l'Outaouais, les territoires de CLSC Pontiac et Des Forestiers.
Dans la région des Laurentides, le territoire de CLSC Antoine-Labelle.
Dans la région de la Mauricie–Centre-du-Québec, le territoire de CLSC Haut-Saint-Maurice, à l'exception des localités de ce territoire comprises dans le secteur II.

TERRITORY 3

Dans la région du Saguenay–Lac-Saint-Jean, les territoires de CLSC Domaine-du-Roy et Lac-Saint-Jean Est.
Dans la région du Bas-Saint-Laurent, les territoires de CLSC de Kamouraska et de Rivière-du-Loup.

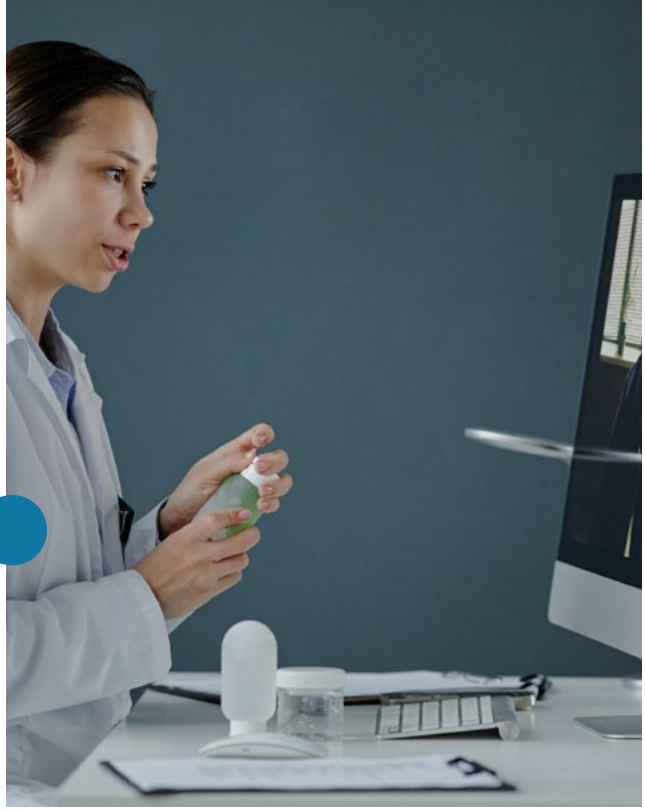
TERRITORY 2

Dans la région du Saguenay–Lac-Saint-Jean, les territoires de CLSC Saguenay, Jonquière, Chicoutimi et Fjord.

TERRITORY 1

Dans la région de la Mauricie–Centre-du-Québec, le territoire du CLSC Haut-Saint-Maurice.
Dans la région de l'Outaouais, les territoires de CLSC Les Collines-de-l'Outaouais, Aylmer, Hull, Gatineau, Vallée-de-la-Lièvre et Petite-Nation.
Dans la région de Québec, les territoires de CLSC Charlevoix-Ouest et Charlevoix-Est.
Dans la région de Chaudière-Appalaches, les territoires de CLSC de Montmagny, L'Islet, Lotbinière, L'Amiante, La Nouvelle-Beauce, Robert-Cliche, Beauce-Sartigan et Lac-Etchemin.
Dans la région de la Montérégie, le territoire de CLSC Bas-Richelieu.
Dans la région de l'Estrie, le territoire CLSC Granit.

6.



LES ANNEXES
APPENDICES

LISTE DES COLLÈGES ÉMETTANT DES PERMIS D'EXERCICE AU CANADA
CANADIAN REGULATORY AUTHORITIES DISTRIBUTING MEDICAL LICENSES

ALBERTA
College of Physicians and Surgeons of Alberta (CPSA)
2700 - 10020 100 Street N.W.
Edmonton, AB T5J 0N3
T : 780 423-4764
T : 1 800 561-3899
registration@cpsa.ab.ca
www.cpsa.ca

COLOMBIE-BRITANNIQUE
College of Physicians and Surgeons of British Columbia (CPSBC)
300 - 669 Howe Street
Vancouver, BC V6C 0B4
T : 604 733-7758
T : 1 800 461-3008
F : 604 733-3503
registration@cpsbc.ca
www.cpsbc.ca

ÎLE-DU-PRINCE-ÉDOUARD
College of Physicians and Surgeons of Prince Edward Island (CPSPEI)
14 Paramount Drive
Charlottetown, PE C1E 0C7
T : 902 566-3861
F : 902 566-3986
info@cpspei.ca
www.cpspei.ca

MANITOBA
College of Physicians and Surgeons of Manitoba (CPSM)
1000 - 1661 Portage Ave
Winnipeg, MB R3J 3T7
T : 204 774-4344
T : 1 877 774-4344
cpsm@cpsm.mb.ca
www.cpsm.mb.ca

NOUVEAU-BRUNSWICK
College of Physicians and Surgeons of New Brunswick (CPSNB)
1 Hampton Road, Suite 300
Rothesay, NB E2E 5K8
T : 506 849-5050
T : 1 800 667-4641
F : 506 849-5069
info@cpsnb.org
www.cpsnb.org

NOUVELLE-ÉCOSSE
College of Physicians and Surgeons of Nova Scotia (CPSNS)
Suite 400 – 175 Western Parkway
Bedford, NS B4B 0V1
T : 902 422-5823
T : 1 877 282-7767
registration@cpsns.ns.ca
www.cpsns.ns.ca

NUNAVUT

Registrar, Health Professions, Department of Health, Government of Nunavut
P.O. Box 390,
Kugluktuk, NU X0B 0E0
T : 1 867 982-7668 **or** 1 867 982-7655
F : 1 867 982-3256 **or** 1 867 982-7640
hssnunavutregistrar@gov.nu.ca
www.gov.nu.ca/health/information/health-professionals-0

ONTARIO

College of Physicians and Surgeons of Ontario (CPSO)
80 College Street
Toronto, ON M5G 2E2
T : 416 967-2600
T : 1 800 268-7096 ext. 617
inquiries@cpso.on.ca
www.cpso.on.ca

QUÉBEC

Collège des médecins du Québec (CMQ)
Bureau 3500
1250, boulevard René-Lévesque Ouest
Montréal (Québec) H3B 0G2
T : 514 933-4441
T : 1 888 MÉDECIN
F : 1 514 933-3112
info@cmq.org
www.cmq.org

SASKATCHEWAN

College of Physicians and Surgeons of Saskatchewan (CPSS)
101 - 2174 Airport Drive
Saskatoon, SK S7L 6M6
T : 306 244-7355
T : 1 800 667-1668
F : 306 244-7355 (Registration/Licensing)
cpssreg@cps.sk.ca
www.cps.sk.ca

TERRE-NEUVE ET LABRADOR

College of Physicians and Surgeons of Newfoundland (CPSNL) **and Labrador**
120 Road, Suite Torbay W 100
St. John's, NL A1A 2G8
T : 709 726-8546
F : 709 726-4725
cpsnl@cpsnl.ca
www.cpsnl.ca

TERRITOIRES DU NORD-OUEST

Department of Health and Social Services, Government of the Northwest Territories
Professional Licensing
P.O. Box 1320
Yellowknife, NT X1A 2L9
T : 867 767-9067 ext. 49053
professional_licensing@gov.nt.ca
www.hss.gov.nt.ca/fr

YUKON

Conseil médical du Yukon
Registraire des médecins praticiens
Boîte 2703 C18
Whitehorse, Yukon Y1A 2C6
T : 867 667-3774
ymc@gov.yk.ca
www.yukonmedicalcouncil.ca

VOUS CHERCHEZ UN PTEM OU UN PEM ?
VOUS VOULEZ PLUS D'INFORMATION SUR LES RÈGLES DE GESTION ?

Postes disponibles en médecine familiale
www.msss.gouv.qc.ca/professionnels/medecine-au-quebec/prem/places-disponibles-medecine-de-famille/

Postes disponibles dans les autres spécialités
https://www.quebec.ca/gouvernement/travailler-gouvernement/sante-services-sociaux/travailler-comme-medecin-specialiste-quebec#c377650

LES RESSOURCES ET ORGANISMES EN LIEN AVEC LA PRATIQUE DE LA MÉDECINE
RESOURCES AND ORGANIZATIONS RELATED TO MEDICAL PRACTICE

Association canadienne de protection médicale (ACPM)
***Canadian Medical Protective Association** (CMPA)*
T : 613 725-2000 **ou** 1 800 267-6522
renseignements@cmpa.org
www.cmpa-acpm.ca

Assurance Beneva
Beneva Insurance
T : 1 800 463-4856
www.beneva.ca/fr/regroupement

Collège des médecins du Québec (CMQ)
T : 514 933-4441 **ou** 1 888 633-3246
info@cmq.org
www.cmq.org
Section des permis
T : 514 933-4253 **ou** 1 888 633-3246 poste 4253
demandepermis@cmq.org

Collège des médecins de famille du Canada (CMFC)
College of Family Physicians of Canada
T : 905 629-0990 **ou** 1 800 387-6197
www.cfpc.ca

Collège royal des médecins et chirurgiens du Canada (CRMCC)
***Royal College of Physicians and Surgeons of Canada** (RCPSC)*
T : 613 730-8177 **ou** 1 800 668-3740
www.royalcollege.ca/fr/about/help

Départements territoriaux de médecine de famille (DTMF)
fmoq.org/pratique/installation-en-pratique/liste-des-dtmf/

Fédération des médecins omnipraticiens du Québec (FMOQ)
T : 514 878-1911 **ou** 1 800 361-8499
info@fmoq.org
www.fmoq.org

Fédération des médecins résident·e·s du Québec (FMRQ)
T : 514 282-0256 **ou** 1 800 465-0215
info@fmrq.qc.ca
www.fmrq.qc.ca
Mme Geneviève Coiteux, PTEM/PEM en MF ptem-mf@fmrq.qc.ca
Mme Johanne Carrier, PEM Autres spécialités pem-sp@fmrq.qc.ca

Fédération des médecins spécialistes du Québec (FMSQ)
T : 514 350-5000 **ou** 1 800 561-0703
info@fmsq.org
www.fmsq.org

Fonds de la recherche du Québec - Santé (FRQS)
T : 514 873-2114 **ou** 1 888 653-6512
www.frqs.gouv.qc.ca

Fonds FMOQ
Montréal **T :** 1 888 542-8597
Québec **T :** 1 877 323-5777
www.fondsfmoq.com/jeunes-medecins

Groupe Desjardins
T : 514 522-4771 ou 1 877 522-4773
www.desjardins.com/fmrq

fdp Gestion privée
Montréal **T :** 514 350-5050 **ou** 1 800 377-7337
Québec **T :** 418 658-4244 **ou** 1 800 720-4244
Sherbrooke **T :** 819 564-0909 **ou** 1 866 564-0909
www.groupefdp.com

Ministère de la Santé et des Services sociaux du Québec (MSSS)
Quebec Ministry of Health and Social Services
www.msss.gouv.qc.ca

MultiD
T : 1 800 363-3068
www.multid.ca/resident

RBC
T : 1 800 769-2511
www.rbcbanqueroyale.com/carriere-med

Régie de l'assurance maladie du Québec (RAMQ)
Quebec Health Insurance Board
T : 514 873-3480 ou 418 643-8210 **ou** 1 800 463-4776 **ou** 1 800 561-9749
www.ramq.gouv.qc.ca

Santé Québec
sante.quebec

SOGEMEC Assurances
T : 514 350-5070 **ou** 1 800 361-5303
www.sogemec.qc.ca

TD Assurance Meloche Monnex
T : 1 877 777-7136
www.MelocheMonnex.com/fmrq

Xacte
Montréal **T :** 1 888 949-8601
Québec **T :** 1 888 949-8601
www.xacte.net

LISTE DES DTMF
LIST OF DTMFs

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eric.lavoie.0105.cisssbsl@ssss.gouv.qc.ca
cc: premiere.ligne.drmg.DMSP.cisssbsl@ssss.gouv.qc.ca

RÉGION 02

SANTÉ QUÉBEC SAGUENAY-LAC-SAINT-JEAN
DOCTEURE MARION DUBOIS
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02.ciusss.drmg@ssss.gouv.qc.ca
cc: ingrid.arneberg.joncas.csssc@ssss.gouv.qc.ca

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drmg.ciussscn@ssss.gouv.qc.ca

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SANTÉ QUÉBEC MAURICIE ET CENTRE-DU-QUÉBEC
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marie-christine.frechette.med@ssss.gouv.qc.ca
04equipesoutienpl@ssss.gouv.qc.ca

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jessica.evans.ciussse-chus@ssss.gouv.qc.ca
francis.beauregard-lepage.med@ssss.gouv.qc.ca

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Montréal (Québec) H2L 4M1
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F : 514 593-2603
dtmfmontreal@ssss.gouv.qc.ca

RÉGION 07

SANTÉ QUÉBEC OUTAOUAIS
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116, boulevard Louis-Émond, bureau D-735
Gatineau (Québec) J8Y 1W7
T : 819 966-6200, poste 333719
F : 819 777-0073
marcel_guilbault@ssss.gouv.qc.ca
eliane.disso@ssss.gouv.qc.ca
07_DRMG@ssss.gouv.qc.ca

RÉGION 08

SANTÉ QUÉBEC ABITIBI-TÉMISCAMINGUE

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Rouyn-Noranda (Québec) J9X 2A9
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F : 819 732-6977
jeanyves.boutet.med@ssss.gouv.qc.ca
08.cisssat.drmg@ssss.gouv.qc.ca

RÉGION 09

SANTÉ QUÉBEC CÔTE-NORD

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roger.dube.09cisss@ssss.gouv.qc.ca
julie.cote.09cisss@ssss.gouv.qc.ca
dtmf.09cisss@ssss.gouv.qc.ca

RÉGION 10

SANTÉ QUÉBEC BAIE JAMES

DOCTEURE JOSÉE BRASSARD
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Chibougamau (Québec) G8P 1N5
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F : 418 748-6739
josee.brassard.med@ssss.gou.qc.ca
10_drmg@ssss.gouv.qc.ca

RÉGION 11

SANTÉ QUÉBEC GASPÉSIE

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Chandler (Québec) G0C 1K0
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sylvain.drapeau.med@ssss.gouv.qc.ca
denis.bujold.cisssgaspesie@ssss.gouv.qc.ca

RÉGION 12

SANTÉ QUÉBEC CHAUDIÈRE-APPALACHES

DOCTEURE GENEVIÈVE CARON-FAUCONNIER
Directrice médicale
DOCTEURE ANNIE LANTHIER
Co-directrice médicale
Hôtel-Dieu de Lévis
143, rue Wolfe, bureau 7757
Lévis (Québec) G6V 3Z1
T : 418 835-7121
genevieve.caron-fauconnier.med@ssss.gouv.qc.ca
annie.lanthier.med@ssss.gouv.qc.ca
dtmf.cisssca@ssss.gouv.qc.ca

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SANTÉ QUÉBEC LAVAL

DOCTEUR JONATHAN LEFEBVRE
Directeur médical
800, boulevard Chomedey, Tour A
Laval (Québec) H7V 3Y4
T : 450 978-2121, poste 32018
jonathan.lefebvre.med@ssss.gouv.qc.ca
dtmf.cissslav@ssss.gouv.qc.ca

RÉGION 14

SANTÉ QUÉBEC LANAUDIÈRE

DOCTEUR HARRY-MAX PROCHETTE
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260, rue Lavaltrie Sud
Joliette (Québec) J6E 5X7
T : 450 759-1157, poste 402440
harry-max.prochette.med@ssss.gouv.qc.ca
drmg.cissslan@ssss.gouv.qc.ca

RÉGION 15

SANTÉ QUÉBEC LAURENTIDES

DOCTEURE ANNE-MARIE PELLETIER
Directrice médicale
125, rue Duquet
Ste-Thérèse (Québec) J7E 1Z3
T : 450 473-6811, poste 44483
15-drmg@ssss.gouv.qc.ca

RÉGION 16

SANTÉ QUÉBEC MONTÉRÉGIE

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1255, rue Beauregard
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dtmf.monteregie@ssss.gouv.qc.ca

RÉGION 17

RÉGION DU NUNAVIK

DOCTEURE GENEVIÈVE AUCLAIR
Directrice médicale
Case postale 900
Kuujjuaq (Québec) J0M 1C0
Centre de santé Inuulitisivik
genevieve.auclair@ssss.gouv.qc.ca
effectifsmedicaux.nunavik@ssss.gouv.qc.ca

RÉGION 18

SANTÉ QUÉBEC TERRES-CRIES-DE-LA-BAIE-JAMES

DOCTEURE CAROLE LAFOREST
Directrice médicale
Case postale 250
Chisasibi (Québec) J0M 1E0
T : 819 855-9001
C : 514 231-1462
carole.laforest.med@ssss.gouv.qc.ca

LISTE DES DMSP
LIST OF MDPS's

RÉGION 01

BAS-SAINT-LAURENT

Santé Québec Bas-Saint-Laurent
355, boul. Saint-Germain Ouest
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richard.bernier.med@ssss.gouv.qc.ca
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www.cisss-bsl.gouv.qc.ca

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305, rue St-Vallier
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CAPITALE-NATIONALE

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julien.clement.med@ssss.gouv.qc.ca
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www.chudequebec.ca

Santé Québec - Institut universitaire de cardiologie et de pneumologie de Québec – Université Laval
2725, chemin Sainte-Foy
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iucpq.qc.ca/en

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Dre Elyse Berger-Pelletier
Mme Karine Paquet
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elyse.berger-pelletier.ciussscn@ssss.gouv.qc.ca
karine.paquet.ciussscn@ssss.gouv.qc.ca
www.ciusss-capitalenationale.gouv.qc.ca

RÉGION 04

MAURICIE-ET-CENTRE-DU-QUÉBEC

Santé Québec Mauricie-et-Centre-du-Québec
858, terrasse Turcotte
Trois-Rivières (QC) G9A 5C5

Dr Olivier Roy
Mme Mélissa Daigle
T : 819 357-2030, poste 2787
olivier_roy@ssss.gouv.qc.ca
melissa_daigle@ssss.gouv.qc.ca
www.ciusssmcq.ca

RÉGION 05

ESTRIE

Santé Québec Estrie – Centre hospitalier universitaire de Sherbrooke (CHUS)
500, rue Murray, Sherbrooke J1G 2K6

Dr Adam Frenette
Mme Véronique Ouellet
T : 819 822-6738
T : 819 346-1110, poste 22503
adam.frenette.med@ssss.gouv.qc.ca
veronique.ouellet.ciusse-chus@ssss.gouv.qc.ca
www.santeestrie.qc.ca

RÉGION 06

MONTRÉAL

Santé Québec Ouest-de-l'Île-de-Montréal
160, avenue Stillview
Pointe-Claire (QC) H9R 2Y2

Dre Louise Miner
Mme Danielle Germain
T : 514 630-2225, poste 5248
lminer.med@ssss.gouv.qc.ca
dgermain.odi@ssss.gouv.qc.ca
ciusss-ouestmtl.gouv.qc.ca

Santé Québec Centre-Ouest-de-l'Île-de-Montréal
3755, chemin de la Côte Sainte-Catherine
Bureau A-142
Montréal (QC) H3T 1E2

Dr Stephen Rosenthal
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stephen.rosenthal.med@ssss.gouv.qc.ca
maria.ghosh.ccomtl@ssss.gouv.qc.ca
ciusss-centreouestmtl.gouv.qc.ca

Santé Québec Centre-Sud-de-l'Île-de-Montréal
Hôpital Notre-Dame
F1133, Pavillon Deschamps
1560, rue Sherbrooke Est
Montréal (QC) H2L 4M1

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ciusss-centresudmtl.gouv.qc.ca

Santé Québec Nord-de-l'Île-de-Montréal - Universitaire
5400, boulevardd Gouin Ouest, Bureau J-1165
Montréal (QC) H4J 1C5

Dre Josée Savoie
Mme Vanessa Legault-Leroux
T : 514 519- 5738
josee.savoie.cnmtl@ssss.gouv.qc.ca
vanessa.legault.cnmtl@ssss.gouv.qc.ca
ciusss-nordmtl.gouv.qc.ca

Santé Québec Est-de-l'Île-de-Montréal
5415, boulevard de l'Assomption
Montréal (QC) H1T 2M4

Dre Martine Leblanc
Mme Mélanie Lajoie
T : 514 252-3453
martine.leblanc.cemtl@ssss.gouv.qc.ca
melanie.lajoie.hmr@ssss.gouv.qc.ca
www.ciusss-estmtl.gouv.qc.ca

Santé Québec - Centre hospitalier de l'Université de Montréal (CHUM)
850, rue Saint-Denis
Bureau S06-256
Montréal (QC) H2X 0A9

Dr Pierre Bourgouin
Mme Analia Castellari
T : 514 890-8003
pierre.bourgouin.med@ssss.gouv.qc.ca
analia.castellari.chum@ssss.gouv.qc.ca
www.chumontreal.qc.ca

Santé Québec - Centre universitaire de santé McGill (CUSM)
2155, rue Guy, 14e étage
Montréal (QC) H3H 2R9

Dre Nicolas Gillot
Mme Renia Georgakakos
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nicolas.gillot@muhc.mcgill.ca
renia.georgakakos@muhc.mcgill.ca
cusm.ca

Santé Québec - Centre hospitalier universitaire Sainte-Justine
3175, chemin de la Côte Sainte-Catherine
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marc.girard.med1@ssss.gouv.qc.ca
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www.chusj.org

Santé Québec - Institut de Cardiologie de Montréal (ICM)
5000, rue Bélanger Est
Montréal (QC) H1T 1C8

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Mme Adalina Pierre
T : 514 593-2502
dmsp@icm-mhi.org
www.icm-mhi.org/fr/institut-de-cardiologie-de-montreal

Santé Québec - Institut Philippe-Pinel de Montréal
10905, boulevard Henri-Bourassa Est
Montréal (QC) H1C 1H1

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T : 514 648-8461, poste 1523
kim.bedard-charrette.ippm@ssss.gouv.qc.ca
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RÉGION 07

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genevieve.gagnon.med@ssss.gouv.qc.ca
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RÉGION 08

ABITIBI-TÉMISCAMINGUE

Santé Québec Abitibi-Témiscamingue
3, 9e Rue
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Dr François Aumond
Mme Mélanie Thériault
T : 819 764-3264, poste 49350
francois.aumond.DMSP@ssss.gouv.qc.ca
08.cissat.DMSP@ssss.gouv.qc.ca
www.cisss-at.gouv.qc.ca

RÉGION 09

CÔTE-NORD

Santé Québec Côte-Nord
835, boul. Jolliet
Baie-Comeau (QC) G5C 1P5

Dr Jean-François Labelle
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T : 418 962-9761, poste 452401
jean-francois.labelle.med@ssss.gouv.qc.ca
claudia-kim.tanguay.09cisss@ssss.gouv.qc.ca
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RÉGION 10

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Dr François Aumond
Mme Jessica Caron
T : 418 748-3575 x72472
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jessica.caron@ssss.gouv.qc.ca
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Gaspé (QC) G4X 2W2

Dr Nathalie Guilbeault
Dr Jean-François Sénéchal
Mme Marie-Ève Huet
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nathalie.guilbeault.med@ssss.gouv.qc.ca
jean-francois.senechal.cisssgaspesie@ssss.gouv.qc.ca
marie-eve.huet.cisssgaspesie@ssss.gouv.qc.ca
www.cisss-gaspesie.gouv.qc.ca

Santé Québec Îles-de-la-Madeleine
430, chemin Principal
Cap-aux-Meules (QC) G4T 1R9

Dre Françoise Giard
Mme Sara Molaison
T : 418 986-2121, poste 8318
francoise.giard.med@ssss.gouv.qc.ca
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Mme Josée Grégoire
T : 418 835-7121, poste 16164
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josee.gregoire.cisssca@ssss.gouv.qc.ca
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RÉGION 13

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Santé Québec Laval
1755, boulevard René-Laennec
Bureau C1-48
Laval (QC) H7M 3L9

Dre Marie-Ève Perron
Mme Chantal Paquette
T : 450 975-5588 (ligne directe)
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RÉGION 14

LANAUDIÈRE

Santé Québec Lanaudière
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Saint-Charles-Borromée, Québec (QC) J6E 6J2

Dre Bouchra Reggad
Mme Ève Belzile
T : 450 759-8222, poste 2504
bouchra.reggad.med@ssss.gouv.qc.ca
eve.belzile.cissslan@ssss.gouv.qc.ca
dmsp-secretariat.cissslan@ssss.gouv.qc.ca
www.cisss-lanaudiere.gouv.qc.ca

RÉGION 15

LAURENTIDES

Santé Québec Laurentides
290, rue De Montigny
Saint-Jérôme (QC) J7Z 5T3

Dr Elie Boustani
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elie.boustani.cissslau@ssss.gouv.qc.ca
danielle.binette.lddm@ssss.gouv.qc.ca
www.santelaurentides.gouv.qc.ca

RÉGION 16

MONTÉRÉGIE

Santé Québec Montérégie-Centre
3120 , boulevard Taschereau
Greenfield Park (QC) J4V 2H1

Dre Inthysone Rajvong
Mme Julie Veilleux
T : 450 466-5000, poste 5407
inthysone_rajvong.cisssmc16@ssss.gouv.qc.ca
julie.veilleux.cisssmc16@ssss.gouv.qc.ca
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Dr Jocelyn Dodaro
Mme Julie Savoie
Mme Ericka Pena
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jocelyn.dodaro.cisssme16@ssss.gouv.qc.ca
julie.savoie.cisssme16@ssss.gouv.qc.ca
ericka.pena@cisssme16@ssss.gouv.qc.ca
dmsp.cisssme16@ssss.gouv.qc.ca
www.santeme.quebec

Santé Québec Montérégie-Ouest
200, boulevard Brisebois
Châteauguay (QC) J6K 4W8

Dre Caroline Bourassa-Fulop
Mme Annie Bouchard
T : 579 491-8775
caroline.bourassa-fulop.med@ssss.gouv.qc.ca
annie.bouhard.cisssmo16@ssss.gouv.qc.ca
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RÉGION 17

NUNAVIK

Centre de santé Inuulitsivik

Dre Nathalie Boulanger
nathalie.boulanger.med1@ssss.gouv.qc.ca
dmsp.admin.csi@ssss.gouv.qc.ca
effectifsmedicaux.nunavik@ssss.gouv.qc.ca

Centre hospitalier Tulattavik de l'Ungava

Dre Nathalie Boulanger
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RÉGION 18

TERRES-CRIES-DE-LA-BAIE-JAMES

Santé Québec Baie-James
20, Fort George
C.P. 250
Chisasibi (QC) J0M 1E0

Dr Francois Prévost
M. Olivier Meyer
T : 514 229-8955
francois.prevost.med@ssss.gouv.qc.ca
olivier.meyer@ssss.gouv.qc.ca
https://www.creehealth.org/fr/home

VOUS CHERCHEZ DE L'INFORMATION SUR… LES PTEM, LES PEM, LE DÉPANNAGE, LE *FELLOWSHIP*, LES DÉROGATIONS

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- Diplômé de la faculté de médecine de l'Université Queen's, 2021

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Sophie Rousseau (médecine de famille)

418 750-3993

Joanie Rose Thériault

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Pour plus d'informations :

Médecin de famille : **dtmf.cisssca@ssss.gouv.qc.ca**
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POUR INFORMATION :

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Capitale Nationale

- MAclinique Lebourgneuf
- MAclinique Sainte-Foy
- MAclinique Quartier-Central, Limoilou Ouverture 2027

Montérégie

- MAclinique Pierre Boucher, Longueuil
- MAclinique Saint-Hyacinthe Ouverture 2027

Laval / Laurentides

- MAclinique santé 440, Laval
- MAclinique St-Antoine, Saint-Jérôme

Chaudière-Appalaches

- MAclinique Lévis
- MAclinique des Ponts, Lévis
- MAclinique des Appalaches, Thetford

Venez découvrir nos cliniques !
Par des médecins, pour des médecins !

En savoir plus
reseaumaclinique.com/batir-sa-pratique

MieuxEtre

Frais de bureau Compétitifs et transparents **15%** **+ taxes**

Démarrez une pratique à votre image.



Une pratique simplifiée

Des espaces pensés pour votre confort, un soutien administratif complet et une équipe qui facilite votre quotidien clinique.

Des outils conçus pour votre pratique

Des technologies et des ressources qui optimisent votre pratique et vous permettent de vous concentrer sur vos patients.

Et plus de bénéfices à découvrir ! Scannez notre code QR.

400+

médecins font déjà partie du Réseau Mieux-Être.

9

RLS couverts par le réseau et plus à venir.

Rejoignez un réseau de GMF où tout est pensé pour vous permettre de vous concentrer sur vos patients.
Des cliniques à la fine pointe, une équipe de soutien performante et
une communauté engagée vous accompagnent même avant votre première journée.

Réseau
Première Ligne

Présent là où ça compte



Et si votre milieu
de pratique vous offrait

plus de soutien ?

Entre les consultations, les suivis, les imprévus, l'administration et la coordination d'équipe, il peut devenir difficile de rester pleinement disponible pour ce qui compte le plus : **vos patients.**

Le Réseau Première Ligne existe pour contribuer à alléger ce qui entoure la pratique médicale tout en respectant l'indépendance de la clinique.

Découvrez le Réseau Première Ligne et trouvez un milieu de pratique qui vous ressemble

reseaupremiereligne.com



« Je savais que je voulais toucher à tout, être une espèce de couteau suisse de la médecine. »

Dr. Antoine Séguin, médecin de famille
Bas-Saint-Laurent

SARROS

Vous souhaitez...

- Accéder à une **pratique diversifiée** et polyvalente
- Faire partie d'une équipe où **l'esprit d'entraide** est important
- Faire une **réelle différence**
- Avoir facilement **accès à la nature**
- Obtenir une belle **qualité de vie**

Avantages de travailler en région

- Rémunération majorée
- Prime d'installation
- 20 journées de ressourcement
- Programme de bourses (médecine de famille et médecine spécialisée)

La pratique en région SARROS est pour vous !

VIDÉOS | BALADOS
IMAGES 360° | MAGAZINE

SARROS | Soutien aux régions pour le recrutement d'omnipraticiens et de spécialistes

EQUIPESARROS
SARROS_QC
SARROS

SARROS.CA



Ouverture
en 2028

Hôpital
de Vaudreuil-Soulanges

**Le plan d'effectifs médicaux (PEM)
est maintenant confirmé.**

Consultez-le !

Médecine spécialisée
recrutement_md_specialiste.cisssmo16@ssss.gouv.qc.ca

Médecine familiale
recrutement_omnis.cisssmo16@ssss.gouv.qc.ca

emplois-cisssmo.ca/pratique-medicale

Santé Québec

Q102 - AOÛT 2026